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One Hundred and Thirty Fourth
ANNUAL REPORT
OF THE
South Carolina State Hospital
FOR THE YEAR ENDING JUNE 30, 1957



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Printed Under the Direction of the
State Budget and Control Board

One Hundred and Thirty Fourth
ANNUAL REPORT
OF THE
South Carolina State Hospital

FOR THE YEAR ENDING JUNE 30, 1957



Printed Under the Direction of the
State Budget and Control Board

SOUTH CAROLINA STATE HOSPITAL

THE SOUTH CAROLINA MENTAL HEALTH COMMISSION

GEORGE A. BUCHANAN, JR.	Columbia
C. M. TUCKER, Jr.	Pageland
E. EDWARD WEHMAN, JR.	Charleston
JOHN M. FEWELL, M.D.	Greenville
SAMUEL G. CREWS	Camden

W. P. BECKMAN, M.D.
State Director of Mental Health

SOUTH CAROLINA STATE HOSPITAL COLUMBIA, S. C.

WILLIAM S. HALL, M.D.
Superintendent

MEDICAL STAFF

COLUMBIA DIVISION

Lawson H. Bowling, M.D. Clinical Director

Male Service

Glenn B. Carrigan, M.D.	Chief
Zoltan Agardy, M.D.	Physician
Leo E. Kirven, Jr., M.D.	Physician
Victor L. Kruger, M.D.	Physician
Elmer W. Long, M.D.	Physician
Wilbur Merkley, M.D.	Physician
Gordon R. Westrope, M.D.	Physician

Female Service

Joe E. Freed, M.D.	Chief
*Julian E. Atkinson, M.D.	Physician
Edward M. Burn, M.D.	Physician
Edwin Douglas Curtis, M.D.	Physician
Katharine Baylis MacInnis, M.D.	Physician
William G. Morehouse, M.D.	Physician
**Frank E. O'Sheal, M.D.	Physician
Mary Tribble Tobin, M.D.	Physician

STATE PARK DIVISION

Sol. B. McLendon, M.D. Clinical Director
and Chief, Male Service

* Reported for duty July 9, 1956.
Resigned for military duty September 27, 1956.
**On Educational Leave.

Male Service

Robert B. Crichton, M.D.	Physician
Albert M. Eaddy, M.D.	Physician
Robert B. Neil, M.D.	Physician
Joseph A. Tobin, M.D.	Physician

Female Service

Irene M. McFarland, M.D.	Chief
Purvis James Boatwright, M.D.	Physician
Ruth Smith Johnson, M.D.	Physician
Donald S. Tarbox, M.D.	Physician
Ben F. Wyman, M.D.	Physician
Louis George Karter, M.D.	Chest Physician

MEDICAL STAFF CONSULTANTS

George Benet, M.D.	Chief Surgeon
Buford S. Chappell, M.D.	Urologist
James W. Fouche, M.D.	Chest Surgeon
Henry F. Hall, M.D.	General Medicine
George R. Laub, M.D.	Eye, Ear, Nose and Throat
Claude K. Lindler, M.D.	General Medicine
Chas. J. Lemmon, Jr., M.D.	Neurosurgcon
Ben N. Miller, M.D.	Internal Medicine
Austin T. Moore, M.D.	Orthopedic Surgeon
Thos. A. Pitts, M.D.	Roentgenologist
John R. Timmons, M.D.	General Surgeon

DENTAL STAFF

Roland S. Pike, D.D.S.	Dentist, Columbia Division
Samuel B. Marks, D.D.S.	Dentist, State Park Division

NURSING SERVICE

Miss Beulah L. Gardner, R.N.	Director, Nursing Service
Miss Martha Moore Bradley, R.N.	Director, Nursing Education

ADJUNCTIVE CLINICAL ACTIVITIES

Elmore A. Martin, Ph.D.	Chief Psychologist
Miss Ethel Sharpe	Chief, Social Service
Mrs. Lillian B. McIntosh	Director, Occupational Therapy
Mrs. Frances C. Shimmel	

Director, Recreation Therapy, Columbia Division

Leon E. Elam	Director, Recreation Therapy, State Park Division
Miss Ann W. Howe	Director, Music Therapy
Mrs. Ella B. Aiken	Librarian
Mrs. Edith L. Hudson	Director, Volunteer Service
Mrs. Myrtle E. Mackey, R.Ph.	Chief Pharmacist
Howard W. Paschal	Chief Clinical Laboratory Technician
Harry C. Allison	Chief X-ray Technician
Clifton C. Geiger	Chief Electroencephalograph Technician
Mrs. Katherine C. Hogue	Director, Industrial Therapy

CHAPLAINS

Rev. J. Obert Kempson.....Chief
Rev. William M. Major.....Columbia Division
Rev. Collie L. Moore.....State Park Division

ADMINISTRATIVE STAFF

Claude W. Connelley.....Acting Business Manager
E. A. Hall, Jr.....Treasurer
John W. Whitehouse.....Personnel Director
C. W. S. Horne.....Registrar

REPORT OF SOUTH CAROLINA MENTAL HEALTH COMMISSION

Columbia, S. C., July 1, 1957

*To His Excellency, George Bell Timmerman, Jr.,
Governor of South Carolina:*

On April 22, 1957, the Commission occupied its new office building at 2214 Bull Street. The construction of this building was made possible by the State Budget and Control Board authorizing the Commission to use sufficient funds for the construction of this building from funds that were appropriated to the State Hospital. The total cost of the building, which was planned to take care of the Commission's immediate needs and to allow for limited future expansion, was \$95,563.72.

Prior to the occupation of this new building, the Commission's offices were on the top floor of the State Highway Department Building. Appreciation is extended to Mr. Claude R. McMillan, Chief Highway Commissioner, for making it possible for the Commission to utilize this space until it was needed by the Highway Department and to the highway employees for their excellent cooperation.

Funds made available to the Commission for permanent improvements at the S. C. State Hospital have been used with two main objectives in mind—first, construction of dormitory buildings to help relieve the over-crowded condition of the hospital and secondly, enlargement and improvement of basic utility facilities. Six new dormitory buildings were constructed, making available 912 beds, of which 273 were occupied by patients moved from the Taylor Building prior to its demolition. This left a net gain of 639 beds to help decrease overcrowding at the hospital. Six hundred eight of the new beds were occupied at the Columbia Division in the fall of 1954, 304 others at the State Park Division in July, 1955. Since that time, the daily average hospital population has increased from 5,966 on June 30, 1955, to 6,220 for the fiscal year ending June 30, 1957. It is obvious that the hospital is rapidly reaching its prior state of overcrowding, making it necessary to provide soon more dormitory space.

To keep pace with the increased patient load at the hospital, it was necessary to make additions to the basic utilities necessary

for the efficient operation of the hospital. After careful study, it became evident that provision should be made for the proper preparation and distribution of food, first at the Columbia Division. A combination kitchen-bakery and cafeteria was constructed, planned to take care of the needs of this division of the hospital for some years to come. The bakery was planned to serve both the Columbia and State Park Divisions. This unit has been in operation since September 4, 1954 and has proven the wisdom of such planning.

With the letting of the contract for the construction of the new Intensive Treatment Ward Building, funds made available since 1952 for permanent improvements at the State Hospital will have been exhausted. The contract for this building was let on June 8, 1957, the low bid being \$2,304,248.21 for construction. Basic equipment for the building, not included in the construction contract, runs the total cost for this building to \$2,619,836.50. This was a long needed facility and we anticipate the use of this building in the early part of the fiscal year 1958-59.

The expenditure of approximately eight million seven hundred thousand dollars for permanent improvements at the State Hospital takes care of less than one-half of what can be considered dire needs of the hospital. The laundry at the Columbia Division is extremely over-taxed and the laundry at the State Park Division is on its last legs and something should be done immediately about building a new one. The kitchen at the State Park Division is totally inadequate and since the preparation of food for Pineland has increased the load for this kitchen, it is quite obvious that a new kitchen with adequate storage and freezing facilities must be provided for immediately. The receiving building at the Columbia Division and the receiving building at the State Park Division are overtaxed and if one or two other receiving hospitals cannot be built in the State, these facilities must be expanded as soon as possible.

During this fiscal year, 17% of all admissions were persons 65 years of age and older. Statistics indicate that the number of people living to become 65 years of age and older is increasing each year, therefore constituting a fairly large portion of our population. Then too, from the backlog that accumulates in the hospital from year to year, others are reaching this age level to

the extent that now in the hospital there are 1,343, or 21%, patients 65 years of age and older. Many demands are made on the hospital to take such cases and this problem of aging has become a serious one for the hospital. It has become necessary to be very rigid in considering applications for admission to the hospital in this age group. If the hospital is to assume the responsibility for the aged persons with mental illness, it is necessary that an area be set aside and buildings constructed suitable for the care and treatment of this type patient. It is not practical to care for these people in multi-story buildings.

Another urgent need is for an infirmary building at the State Park Division of the hospital. Presently, this division of the hospital does not have any adequate area to care for patients requiring medical and minor surgical treatment. Surgery has to be done at the Columbia Division where the patient has to be confined until he is able to be returned to State Park. The construction of a facility to take care of this service at the State Park Division cannot be postponed much longer.

Because the State Park Division of the hospital is located some seven miles from Columbia, it has been difficult to secure personnel, especially single persons. We feel that it is desirable that there be constructed a dormitory to take care of 50 single Negro nurses and female aides. Nursing Schools now require their students to have three months' training in a mental hospital and the hospital has no facilities to provide for these affiliate Negro nurses, although there is provision for such affiliate nurses at the Columbia Division.

There is constant need for renovation of older buildings at the hospital and funds should be made available for such renovations.

Listed below are construction and renovation projects with estimated costs which are felt to be in dire need:

Laundry Building	\$ 500,000.00
Central Kitchen and Dining Room (State Park)	900,000.00
Receiving Ward Building (Columbia)	1,000,000.00
Geriatric Ward Buildings (Columbia)	2,000,000.00
Infirmary Building (State Park)	1,000,000.00
Nurses' Class Room and Quarters (State Park)	200,000.00
Major Renovations:	
Revamp electric work in Center and North Buildings	24,000.00
New floors in Center, Parker, and Wil- liams Buildings	25,000.00
Quarry tile in Dining Areas at State Park Division	12,000.00

During this fiscal year, there were 2350 new admissions to the hospital. Of this number, 1747 or 74% were admitted for the first time (first admissions) and 603 or 26% had been in the hospital before (readmissions). Of the total number of all new admissions, 392 or 17% were 65 years of age and over. In the number of first admissions, there were 339 or 20%, 65 years of age and over. Requests for the admission of persons 65 years of age and over are becoming a serious problem for the hospital. Our buildings are not constructed to house this type of patient and the outlook for recovery of such patients is not good.

The large number of readmissions presents another problem and the Commission feels that research is clearly needed to discover why so many return to the hospital and what can be done to prevent this. Federal grants are available for research in this area and the State Hospital has requested funds for this purpose to set up a pilot study in one of our counties. It is hoped that this study will point up various ways in which better communication can be established between the patient's home and the hospital, and ways whereby the patient after he goes home can be helped to stay home, thus cutting down on the readmission rate.

Federal funds have also become available to finance other research projects in mental hospitals. Our State Hospital has prepared an application for funds to finance a project involving a multidisciplinary treatment approach toward treatment of pa-

tients. A special group of patients will be selected for this study.

The average daily population of patients for this fiscal year was 6220, an increase of 107 over the average for the previous fiscal year. This increase has been occurring each year gradually increasing the total population of the hospital. This annual increase can be curtailed, if not entirely done away with, only by providing more intensive treatment for new admissions to the hospital possible only if per patient expenditures are increased. Some States provided this and have been able to turn the tide to the extent of getting out more patients than those being admitted.

At the end of this fiscal year, the hospital had one psychiatrist for every 227 mental patients; one nurse for every 122 patients and one psychiatric aide (attendant) for every nine patients. These averages are misleading, however, because of the fact that there are three eight-hour shifts during a 24 hour period. The patient load varies with each shift, especially the second and third shifts. In order to give the newly admitted patient a maximum opportunity to recover and return home, we must continue to strive to increase medical personnel—psychiatrists, psychologists, social workers, nurses and aides.

The hospital's appropriation permitting a per diem cost of \$2.27 per patient this year did not permit us to change to any noticeable degree this ratio. An increase in appropriations to provide for more medical personnel, we believe, will undoubtedly pay off in the long run by getting more persons home and cutting down on the backlog that accumulates in the hospital.

During this fiscal year, persons admitted to the State Hospital, Whitten Village and Pineland were investigated in order to determine who might be placed on a paying status. Investigation of admissions to Whitten Village was discontinued after April 30, 1957 when a separate board of trustees for that institution was set up. From June 30, 1956 to this date, 285 trainees were on a part pay or full pay status. During the year, there were 860 patients at the State Hospital either on a part pay or full pay status. There were 156 claims filed against the estates of persons who died in the hospital, some being paid in full and others compromised. At Pineland there were 12 trainees on a part pay status. The total amount collected, including institutional license fees, amounted to \$290,981.31.

During the year, statistics have been obtained on all persons admitted to the State Hospital together with Pineland, Whitten Village and our five mental health clinics. Since Whitten Village was removed from the Mental Health Commission's jurisdiction, arrangements were made with the superintendent of Whitten Village to continue reporting statistical data from that institution. In gathering such statistical data, we cooperate with the Biometrics Branch of the National Institute of Mental Health in reporting to it annually the statistics it desires on mental illness and mental retardation in institutions as well as individuals seen in community mental health clinics. This unit continues to render payroll service to the State Hospital, Pineland and the Mental Hygiene Division of the Commission.

The following institutions for the care of the mentally ill and mentally retarded were licensed during the year:

- S. C. State Hospital
- Whitten Village
- Pineland, A State Training School
- Psychiatric Department of the Medical College Teaching Hospital
- Psychiatric Department Greenville General Hospital
- Waverly Sanitarium

Those institutions licensed for the care and treatment of alcoholics are as follows:

- Palmetto Rest Home, Inc.
- Carolina Rest Home Hospital
- Abt Sanitarium
- Laurens Rest Home, Inc.

In its Mental Hygiene Division, the Mental Health Commission continues to promote a program of prevention of mental illness and mental health education by continuing community mental health clinics and carrying on a mental health education program.

At the present time, there are five community mental health clinics listed as follows:

- Charleston County Mental Health Clinic
- Greenville County Mental Health Clinic
- Richland County Mental Health Clinic
- Spartanburg County Mental Health Clinic
- Darlington-Florence County Mental Health Clinic

The statistical table shown below in a way indicates the type and volume of work done in these clinics during the year:

MOVEMENT OF PATIENTS

	Total Patients	Patients under 18 years	Patients 18 years and over
Number of patients <i>Carried Over</i> at beginning of year	731	321	410
Number of <i>New Admissions</i> during the year.....	988	519	469
Number of <i>Readmissions</i> during the year, pa- tients last terminated in a prior year.....	86	44	42
Number of <i>Readmissions</i> during the year, pa- tients last terminated this year.....	27	10	17
Number of patients <i>Terminated</i> during the year	1111	551	560
Number of patients <i>Carried Over</i> at end of year	721	343	378
Total patients during year.....	1805	884	921
	During Clinic Hours	After Clinic Hours	
Total number of hours for community services....	1518	339¾	

It is still difficult to fully staff each clinic with social workers, psychologists and psychiatrists and some of the clinics still have vacancies for such personnel. The filling of these vacancies is made difficult by the fact that all States have embarked upon similar programs and there is a great shortage of trained personnel. This scarcity of personnel is creating terrific competition between the States for these specialists.

In order to secure needed personnel, the Commission has been carrying on a training program for several years, offering training stipends for persons interested in the field of psychiatry, psychology, psychiatric social work and psychiatric nursing. During the year, the Commission had in training, one psychiatrist, one psychiatric nurse and one psychologist. These persons are obligated to return to South Carolina and work in our mental health program.

It is felt that eventually mental health education will play a great part in the prevention of mental illness and people of our State have shown tremendous interest in mental health. Our personnel engaged in this program have been swamped with requests for services and have been unable to take care of all demands upon them.

The Mental Health Education Unit, staffed with a clinical psychologist as coordinator of the program and assisted by two

mental health consultants, two secretaries and two clerks, has set up this program of mental health education, public relations and consultative services to other public and private agencies. Its consultants worked closely with such groups as the S. C. Association for Mental Health, S. C. Association for Retarded Children, P.T.A., and various service clubs in developing community services for mental health. Training institutes for volunteer resource persons in community mental health education were held in Conway, Chester and Greenville. A bimonthly mailing, *RESOURCE*, was distributed to approximately 400 persons who expressed an interest in keeping up to date on mental health developments. During the year, the unit received approximately 4,000 requests for films which were seen by more than 100,000 persons in schools, churches, and various community gatherings. It helped plan the S. C. Conference on Exceptional Children and conducted a Leadership Workshop at the University of South Carolina for the S. C. Federation of Women's Clubs. The consultants also met with individuals and groups throughout the State in many other educational and consultative endeavors.

To the Governor, the General Assembly, the other State agencies and departments, the staffs of the State Hospital, the training schools, the clinics and the employees of the Commission's central office, the Commission tenders its thanks for aid given in the handling of this most distressing of medical problems.

Respectfully submitted

G. A. Buchanan, Jr., *Chairman*

C. M. Tucker, Jr.

E. Edward Wehman, Jr.

John M. Fewell, M.D.

Samuel G. Crews

South Carolina Mental Health
Commission

SUPERINTENDENT'S REPORT

Columbia, S. C., July 1, 1957

To the South Carolina Mental Health Commission:

Gentlemen:

In compliance with your requirements the following report of the activities of the South Carolina State Hospital for the year ending June 30, 1957 is herewith submitted:

MEDICAL DEPARTMENT

GENERAL STATISTICS

July 1, 1956 through June 30, 1957

	White Men	White Women	Negro Men	Negro Women	Total
Patients on books of hospital at beginning of hospital year.....	1,897	2,222	1,785	1,645	7,549
Admissions during twelve months:					
First admissions	649	488	327	283	1,747
Readmissions	223	221	82	77	603
Total received	872	709	409	360	2,350
Total on books during twelve months.....	2,769	2,931	2,194	2,005	9,899
Discharged from books during twelve months:					
Recovered	35	6	51	6	98
Improved	280	426	150	232	1,088
Unimproved	10	21	7	11	49
Unchanged	279	83	45	16	423
Unclassified	98	40	18	4	160
Total discharged	702	576	271	269	1,818
Died during twelve months	155	147	97	67	466
Total discharged and died	857	723	368	336	2,284
Patients remaining on books at end of hospital year:					
In hospital	1,547	1,672	1,649	1,436	6,304
On trial visit or otherwise absent	365	536	177	233	1,311
Total	1,912	2,208	1,823	1,669	7,615
Daily average in hospital	1,511	1,661	1,641	1,407	6,220

ADMISSIONS

There were 2350 patients admitted during the year, with 61 of them on a voluntary basis.

VOLUNTARY ADMISSIONS

White Men	White Women	Negro Men	Negro Women	Total
25	31	2	3	61

DISCHARGES

Discharged from the books were 1818 patients of whom 180 were alcoholics, and 9 were drug addicts without mental disorder.

Also discharged were 125 patients who were diagnosed as alcoholics with mental disorder.

DEATHS

Death occurred in 466 cases or 4.7% of the entire patient population under treatment during the twelve months.

There were 155 white men; 147 white women; 97 Negro men and 67 Negro women.

The leading cause of death continued to be diseases of the circulatory system.

COURT CASES

During the year 177 persons were committed to the hospital by the Courts of General Sessions, the County Courts and by the Juvenile Domestic Relations Courts for psychiatric examinations.

COURT CASES

PSYCHOSES	White Men	White Women	Negro Men	Negro Women	Total
Acute Brain Syndromes Associated with:					
Other diseases and condition, NEC (not elsewhere classified), or unspecified disease or condition.....	....	....	1	....	1
Chronic Brain Syndromes with Psychotic Reaction, Associated With:					
Central nervous system syphilis	1	....	....	....	1
Other trauma .....	...	....	2	....	2
Cerebral arteriosclerosis	2	....	....	....	5
Convulsive disorder	2	....	....	....	2
Psychotic Disorders:					
Paranoid reactions	2	....	....	....	2
Affective reactions	2	....	....	1	3
Schizophrenic reactions	12	....	13	1	26
Psychoneurotic Disorders	1	....	....	....	1
Personality Disorders:					
All other personality disorders	2	....	....	....	2
Mental Deficiency	2	....	3	....	5
No Mental Disorder	81	15	28	3	127
Total	107	15	50	5	177

COMMITTED BY ORDER OF GOVERNOR

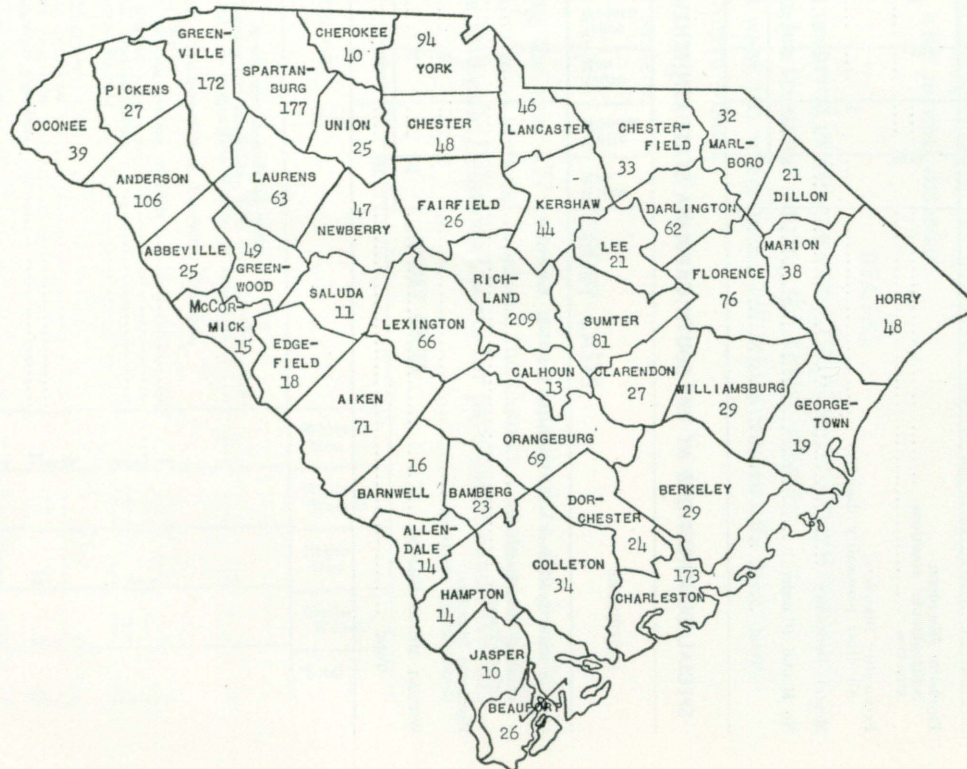
PSYCHOSES	White Men	White Women	Negro Men	Negro Women	Total
Psychotic Disorders:					
Schizophrenic reactions	7	....	2	1	10
Affective	8	....	....	....	2
Personality Disorders:					
All other personality disorders .....	....	1	....	....	1
Mental Deficiency .....	....	....	2	....	2
No Mental Disorder	3	....	2	....	5
Total	12	1	6	1	20

SPECIAL EXAMINATIONS AT THE SOUTH CAROLINA STATE PENITENTIARY

PSYCHOSES	White Men	White Women	Negro Men	Negro Women	Total
Chronic Brain Syndromes with Psychotic Reaction, Associated With:					
Cerebral arteriosclerosis	1	....	....	....	1
Other Trauma .....	....	....	1	....	1
Psychotic Disorders:					
Schizophrenic reactions	5	....	5	....	10
Without Mental Disorder	10	....	7	....	17
Total	16	....	13	....	29

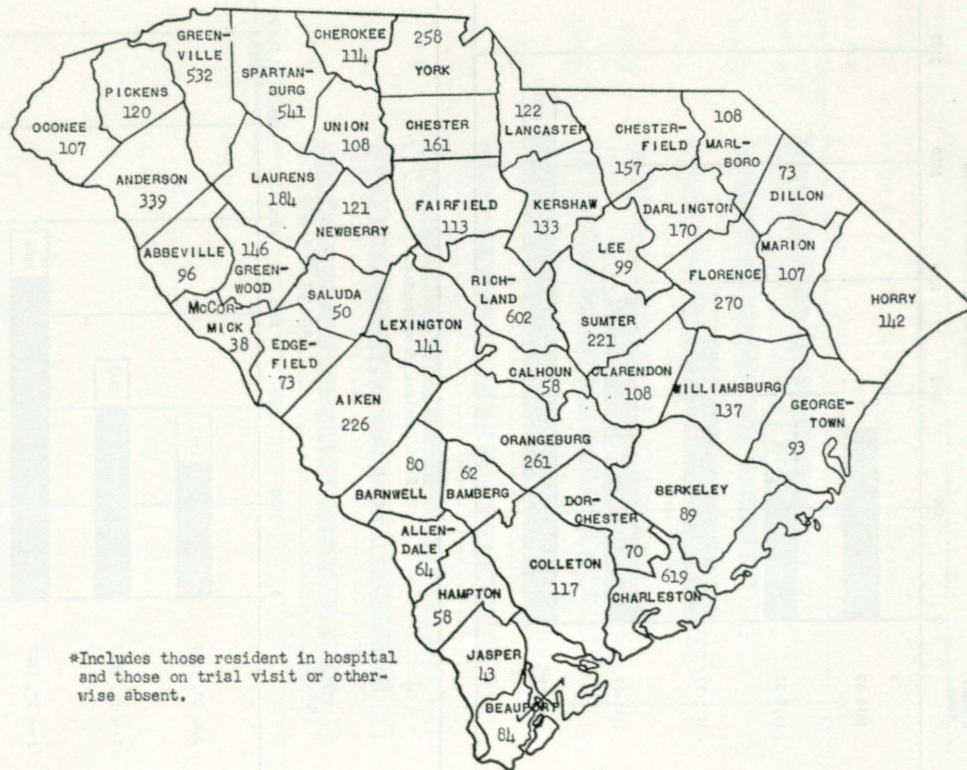
SOUTH CAROLINA STATE HOSPITAL

Patients Received By Counties Fiscal Year 1956-57

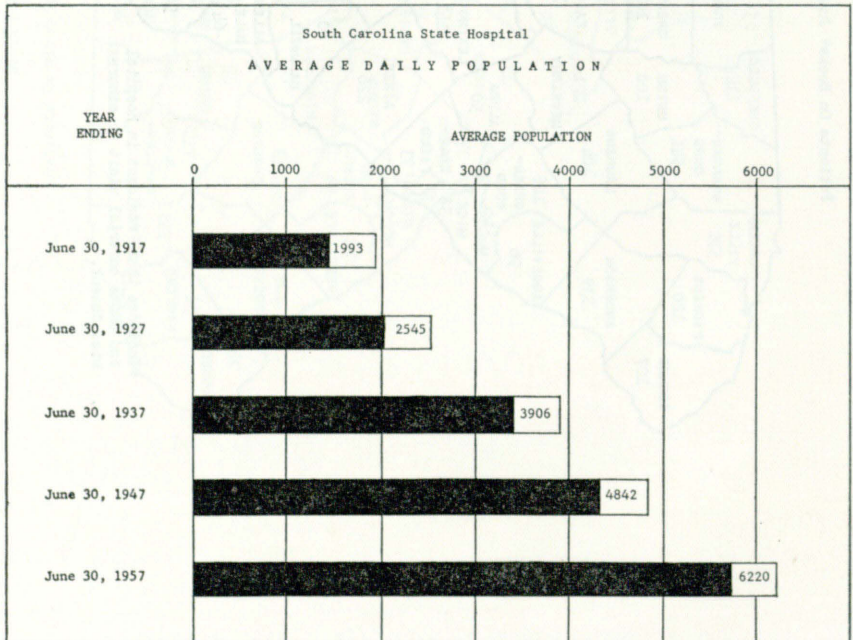
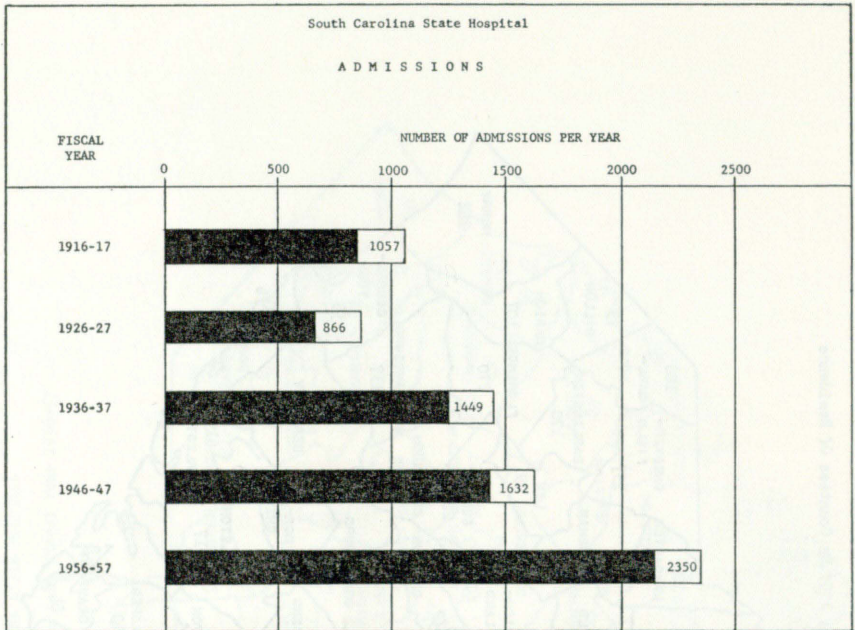


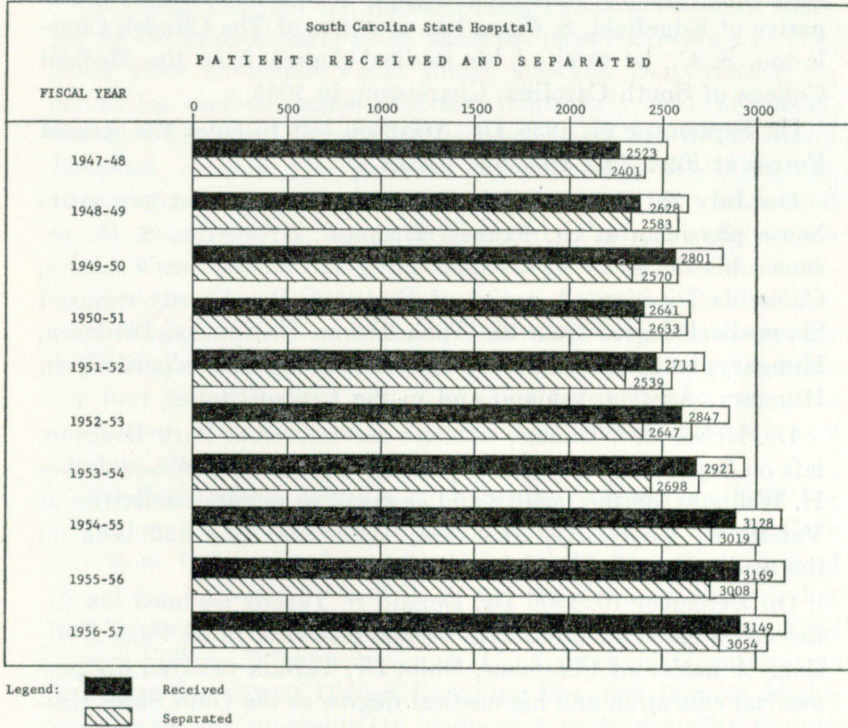
SOUTH CAROLINA STATE HOSPITAL

Patients On Books* June 30, 1957 By Counties Of Residence



*Includes those resident in hospital and those on trial visit or otherwise absent.





MEDICAL STAFF

On July 9, 1956 Dr. Julian Edgar Atkinson reported as an assistant physician and was assigned to the women's service, Columbia Division. He had just completed a rotating internship at the Milwaukee County General Hospital, Milwaukee, Wisconsin. A native of Edgefield, S. C., and an alumnus of The Citadel, Charleston, S. C., he received his medical degree from the Medical College of South Carolina, Charleston, in 1955.

On September 27, 1956 Dr. Atkinson left to enter the Armed Forces at Fort Sam Houston, Texas.

On July 23, 1956 Dr. Zoltan Agardy, for the past two years house physician at St. Francis Hospital, Greenville, S. C., assumed his duties as an assistant physician on the men's service, Columbia Division. A native of Hungary, Dr. Agardy received his medical degree from the Tissa Tetran University, Debrecen, Hungary, and had extensive medical training and experience in Hungary, Austria, Finland and in the United States.

Dr. Helen M. Williams, women's service, State Park Division, left on September 30, 1956 to join her husband, Professor James H. Williams, on the faculty and engaged in research activities at Vanderbilt University, Nashville, Tennessee. She had been on the medical staff since July 26, 1954.

On December 10, 1956 Dr. Donald S. Tarbox assumed his duties as an assistant physician, women's service, State Park Division. A native of Columbus, Ohio, Dr. Tarbox received his pre-medical education and his medical degree at the Ohio State University, Columbus, Ohio, and since then was engaged in private practice in Ohio, North and South Carolina. For sometime he was on the medical staff of the Savannah River Project of the DuPont Co., Augusta, Georgia, and recently was in general practice at New Ellenton, S. C.

On January 2, 1957 Dr. Katharine Baylis MacInnis joined the medical staff as an assistant physician, women's service, Columbia Division, with the possibility of the development of an allergy clinic in the hospital. A graduate of the University of South Carolina, with her medical degree from the Woman's Medical College, Philadelphia, Pennsylvania, Dr. MacInnis served an internship in the Woman's Hospital, Baltimore, Maryland. Graduate work was done in Johns Hopkins Medical Col-

lege, Baltimore, and in the University of Pennsylvania Hospital, Philadelphia. After being in private practice in Greensboro, N. C. and Binghamton, New York, she returned to Columbia in 1940 to specialize in the diagnosis and treatment of allergic conditions.

On January 2, 1957 Dr. Robert Battey Crichton became a member of the medical staff as an assistant physician, men's service, State Park Division. From Rome, Georgia, Dr. Crichton received his medical degree at Emory University Medical School, Emory University, Georgia, and served internships in the Grady Hospital, Atlanta, Georgia, and the Columbus City Hospital, Columbus, Georgia. Special training in obstetrics was secured at the old New York Lying-In-Hospital. Prior to entering the U. S. Army Medical Corps during World War II he was medical director, School Health Department, Arlington County, Virginia. After separation from the Army Dr. Crichton was on the staff of the Milledgeville State Hospital, Milledgeville, Georgia, for four years. For the past year, until funds for the particular work were exhausted, he was engaged in out-patient work as a civilian physician at Fort Gordon, Georgia.

Dr. Ruth Smith Johnson on February 25, 1957 assumed her duties as an assistant physician, women's service, State Park Division. Originally from Charleston, S. C., and a graduate of Winthrop College, Rock Hill, S. C., Dr. Johnson received her medical degree from the Bowman-Gray School of Medicine, Wake Forest College, Winston-Salem, N. C. A rotating internship was served in the City of Detroit Receiving Hospital, Detroit, Michigan, with an internship in pediatrics with the City-County Health Department, Winston-Salem, N. C., and at Duke University Hospital, Durham, N. C. She was in the private practice of pediatrics in Florence, S. C., prior to coming to Columbia where her husband, Dr. Elbert N. Johnson, Jr., is a physician at the U. S. Veterans Hospital. Dr. Johnson's specialty of pediatrics will be of great value in a consultative capacity with the children at Pineland, A State Training School, adjacent to the State Park Division.

June 30, 1957 Dr. Wilbur Merkley, senior assistant physician, men's service, Columbia Division, retired to make his home in the Plantation Estates, DeBary, Florida. He had been on the medical staff since July 1, 1951.

During the year there were six additions to the medical staff. Three physicians resigned and left, and one remains on educational leave.

The continued steady increase in the patient population and the efforts to provide the newest methods of therapy for the mentally ill stress forcefully the urgency for a larger medical staff, additional nurses and psychiatric aides, as well as adjunctive therapists, to provide the desired care and treatment, and to maintain the standards of efficiency.

Junior Interns

During the month of August 1956 these rising seniors who had been at the hospital as junior medical interns since early in June 1956, left for a vacation before returning to their studies:

From the Medical College of South Carolina, Charleston: Marshall L. Shearer of Charleston who reported on June 4; Melvin D. Medlock and Robert N. Milling of Columbia, W. D. Clarkson, Kingstree, Robert Rasheed, Georgetown, and Robert Davis, Jr., of Camden, here since June 11, 1956; and James H. Fleming, Jr., of Columbia, who came June 15 and left September 15, 1956 to return to Vanderbilt University School of Medicine, Nashville, Tennessee.

On June 10, 1957 these students from the Medical College of South Carolina reported as junior medical interns for the summer, with all of them assigned to the State Park Division: Jean B. LaBorde and Kendall M. Beckman, Jr., of Columbia, James C. Yarborough, Jr., Anderson, and David G. Pinosky of Charleston. With the supervision of the staff physicians they performed routine ward activities, attended staff conferences and in general attained knowledge and insight into mental illnesses and methods of therapy therefor.

Medical Students

Throughout the year small groups of students from the Medical College of S. C. continued to be assigned to the hospital for two weeks each for intensive psychiatric study and practical ward experience.

Honors for Staff Members

The Board of Trustees, Medical College of S. C., at the May 1957 meeting elevated to the position of clinical professor of psychiatry, Dr. William S. Hall, superintendent, South Carolina State Hospital. He had on September 22, 1955 been elected as associate clinical professor of neuropsychiatry at the Medical College.

At the September 1955 Board of Trustees' meeting others of the S. C. State Hospital medical staff were elected as assistant clinical professors of neuropsychiatry: Dr. Lawson H. Bowling, clinical director, Columbia Division, Dr. Sol B. McLendon, clinical director, State Park Division, and Dr. Edward M. Burn, Dr. Joe E. Freed and Dr. Wm. G. Morehouse of the Columbia Division.

For many years there has been a course of instruction in psychiatry at the Medical College, conducted for a long while by Dr. C. Fred Williams, superintendent, S. C. State Hospital, who was the first professor of psychiatry at the college. He inaugurated the custom of having the senior students come to the hospital in small groups for additional psychiatric information and practical experience with the mentally ill patients. In recent years Dr. J. J. Cleckley of Charleston, in charge of the Department of Neuropsychiatry, has continued the practice of having the senior students spend a specified time at the hospital for the prescribed intensive course.

With the election of the staff members to the faculty of the Medical College a schedule was prepared for lectures to the students in Charleston in addition to the instruction given during the time spent in the S. C. State Hospital.

At the annual meeting of the South Carolina State Employees Association held in Columbia on June 22, 1956 Dr. Joe E. Freed, chief, women's service, Columbia Division, was elected president for the ensuing year.

On Wednesday, June 12, 1957, at the annual meeting of the Southeastern Society of Neurology and Psychiatry in the Elks Club, Augusta, Georgia, with Dr. George H. Ingram of Augusta, presiding, Dr. Edward M. Burn, senior assistant physician, women's service, Columbia Division, was elected president. Others of the staff elected were: Dr. Lawson H. Bowling, vice president,

and Dr. William G. Morehouse, secretary-treasurer. This society is composed of psychiatrists, neurologists and physicians particularly interested in psychosomatic medicine throughout South Carolina and eastern Georgia.

June 1, 1957 Dr. Ben N. Miller, consultant internal medicine, was at the Duke University Medical School, Durham, N. C., elected president of the Duke University National Council, a top alumni post.

In June 1957 Dr. Katharine B. MacInnis, an assistant physician, women's service, Columbia Division, was appointed vice-chairman South Carolina region, American Foundation for Allergic Diseases.

Talks By the Hospital Superintendent

The hospital superintendent, Dr. Hall, was the guest speaker on these occasions:

Thursday morning, August 9, 1956, at the annual convention of the S. C. Probate Judges, Francis Marion Hotel, Charleston, S. C., August 8, 9 and 10, 1956, on the subject, "Progress at the South Carolina State Hospital."

Thursday, November 1, 1956, spoke at the third annual meeting of the S. C. Association for Mental Health, Jefferson Hotel, Columbia, referable to "The Present Status of the S. C. State Hospital."

Monday, January 21, 1957, annual meeting, Florence County Mental Health Association in Florence, referable to "Patient Care at the S. C. State Hospital."

Monday, February 4, 1957, meeting of the Central Baptist Pastors Conference, First Baptist Church, Columbia, on the subject "Community Clergy and Mental Health." The group of seventy-five ministers from twelve associations adjourned to the Mills Building Cafeteria at the hospital for lunch, after which there was an extensive tour of the Columbia Division conducted by staff members.

Thursday, February 21, 1957, discussed "The Status of the S. C. State Hospital" at a meeting of the Greenville County Mental Health Association in Greenville.

Wednesday, February 27, 1957, participated in a panel discussion of "The Medical Witness in Court Proceedings" at a

joint meeting of the Sixth Bar Association and the Fifth District Medical Association, Andrew Jackson Hotel, Rock Hill, S. C. This program was arranged by Dr. John M. Pratt, York, S. C., a former member of the hospital medical staff.

Monday, April 15, 1957, presented at the monthly meeting of the Columbia Medical Club an essay on "Life and Death."

Participation in Meetings

Tuesday, July 24, 1956, Dr. Lawson H. Bowling, clinical director, Columbia Division, appeared before the Laurens County Association for Mental Health in Laurens and spoke on "This Question of Mental Health."

August 1-3, 1956 Dr. Hall, accompanied by Hon. Geo. A. Buchanan, Jr., chairman, S. C. Mental Health Commission, and Dr. W. P. Beckman, State director of mental health, attended in Daytona Beach, Florida, the conference of the Southern Re-Educational Board referable to the training and utilization of psychiatrists.

Monday, August 13, 1956, the regular scientific meeting of the Columbia Medical Society of Richland County was held in the Benet Auditorium, Columbia Division, preceded by a dinner served in the same building. Dr. W. T. Barron of the city, president, presided, with the welcome extended by Dr. Hall. Dr. Bowling introduced staff members, Dr. Freed, Dr. Morehouse and Dr. Burn, who presented a panel discussion on "The Ataractic Drugs." Prior to the program presentation, Dr. William Weston, Jr., and Dr. G. S. T. Peeples spoke briefly on the use of the polio vaccine in South Carolina.

Thursday, October 4, 1956, Dr. Edward M. Burn, vice president, Southeastern Society of Neurology and Psychiatry, accompanied by Dr. Bowling and Dr. Irene M. McFarland, chief, women's service, State Park Division, attended the meeting at the Charleston Country Club, Charleston.

Dr. Hall, with Dr. W. P. Beckman, State director of mental health, were present at the Eighth Mental Hospital Institute conducted under the auspices of the American Psychiatric Association at the Shirley-Savoy Hotel, October 8-12, 1956, in Denver, Colorado. These mental hospital institutes, attended by a wide representation from all types of mental hospitals, psychia-

tric services in general hospitals, schools for the mentally retarded, and the central administrative offices of the United States and Canada, are organized to provide for and encourage free discussion by all who attend. They are not designed to take "official action" on controversial issues, but rather to seek solutions to common problems in a spirit of cooperative investigation.

In October 1956 Dr. Hall was appointed a member of the steering committee, Nursing Personnel for Mental Health Programs of the Southern Regional Education Board; and on December 3 and 4, 1956 attended a conference in Atlanta, Georgia.

February 14 and 15, 1957 he was again present at a conference in Atlanta as a member of the steering committee and discussion group of the Southern Regional Board referable to the meeting to be held in Wagoner, Oklahoma, March 26-29, 1957.

Dr. Hall attended the Oklahoma session in March, and as an item of interest, was on this trip made an honorary member of the Choctaw Indian Tribe of that State.

As past president, Dr. Hall, with Dr. Burn, vice-president, Southeastern Society of Neurology and Psychiatry, were the committee on arrangements for the 38th clinical meeting of this group at the Jefferson Hotel, Columbia, on March 14, 1957.

March 19, 1957 Dr. Hall, Dr. Freed, Dr. Burn and Dr. Morehouse participated in a panel discussion at the York County Medical Society in Rock Hill regarding the tranquilizing drugs, with particular reference to their use at the S. C. State Hospital during the past two years.

March 19, 1957 Dr. Hall, Dr. Freed, Dr. Burn and Dr. Morehouse participated in a panel discussion at the York County Medical Society in Rock Hill regarding the tranquilizing drugs, with particular reference to their use at the S. C. State Hospital during the past two years.

March 25, 1957 at the meeting of the Columbia Medical Society Dr. Bowling was in a panel discussion referable to "The Doctor and the Law."

April 8, 1957 Dr. Leo E. Kirven, Jr., at the West Columbia First Baptist Church discussed "The Alcoholic Problem from the Psychiatric Standpoint."

April 30, May 1 and 2, 1957 Dr. Hall, Dr. Sol. B. McLendon, clinical director, State Park Division, Dr. Glenn B. Carrigan,

chief, men's service, Columbia Division, Dr. Morehouse, with Dr. Elmer W. Long and Dr. Zoltan Agardy, men's service, Columbia Division, attended the annual meeting of the South Carolina Medical Association at Myrtle Beach, S. C.

May 13-17, 1957 Dr. McLendon and Dr. Morehouse attended the annual meeting of the American Psychiatric Association in Chicago.

At this meeting Dr. Burn was elected a Fellow of the American Psychiatric Association.

May 23, 1957 Dr. Freed, Dr. Burn and Dr. Morehouse were on the program of the Pee Dee Medical Association at Dillon, S. C., for a discussion of "The Tranquilizing Drugs." Dr. Hall was moderator for this event.

Name Changed

On November 19, 1956 when securing naturalization papers and becoming a United States citizen, Dr. Victor L. Krueger had his name officially and legally changed to the original spelling of Kruger, eliminating the "e" which had been added during his escape from Hungary in 1945. A native of that country, Dr. Kruger has been on the medical staff since April 8, 1953.

MEDICAL DEPARTMENT DATA

On June 30, 1957 there were 26 full time physicians (psychiatrists), including one on educational leave; 10 part time physicians; 59 registered nurses available for ward duty, including the supervisors; and 682 psychiatric aides.

New Working Hours

The three-shift eight-hour working period for nurses and psychiatric aides inaugurated January 6, 1954, continued most effective in a more contented attitude of the personnel with more efficient care of the patients.

Orientation Courses for Aides

The intensive orientation course for psychiatric aides at the Columbia and State Park Divisions initiated in September 1953 and in April 1954 respectively, has steadily proved of great value. The course for a total of fifty-six hours conducted by medical

staff members and representatives from various sections of the hospital reflects a clearer understanding of duties and responsibilities, and more efficient work performance. Details pertaining to this important phase of hospital activities are in the nursing service report.

Affiliate Student Nurses

On July 2, 1956 the 25th group of affiliate student nurses from schools of nursing throughout the State reported for the prescribed twelve weeks psychiatric training and practical experience in the hospital. During the period of this annual report a total of 245 students were in training here, as outlined in comments of the nursing education service.

Trainee Programs

More and more the hospital has become a center for trainee programs in various activities. During the past year there have been trainees in the laboratory, the psychology and the music sections, as well as several college students here as ward trainees for the summer.

The clinical pastoral training course in operation for several years was attended by theological students and ministers.

NURSING SERVICE

Both Divisions

Continued expansion of activities of every service and the introduction of new therapies increased the responsibilities and duties of the nursing service at the Columbia and the State Park Divisions.

The assignment of physicians to designated units afforded opportunities for greater service, and the administration of newer treatments and medication.

The intensive psychiatric orientation course of 56 hours, initiated September 1953, continued to create interest among the aide personnel with cooperation in efforts toward advancement, more knowledge, appreciation and understanding of the services rendered the patients. The course conducted by medical staff members and representatives from various sections of the hospital

was attended by psychiatric aide personnel of both divisions, with certificates of completion awarded by Dr. Hall.

As a whole, the nursing and aide personnel indicated a deep sense of obligation toward those intrusted to their care, and there is commendation for their efficient service.

Group No.	Course Began	Course Ended	Men	Women
Columbia Division.....7	Sept. 11, 1956	Jan. 31, 1957.....	41	24
Columbia Division.....8	Feb. 25, 1957	June 7, 1957.....	26	31
State Park Division.....7	Sept. 11, 1956	Jan. 17, 1957.....	22	22
State Park Division.....8	Feb. 5, 1957	May 16, 1957.....	22	21

Highlights of the Year

Completion of the intensive orientation course by the majority of psychiatric aides.

Effective May 13, 1957—the title of attendant officially changed to that of “psychiatric aide”, and the wearing of the proper insignia and identification bar while on duty made a required part of the hospital official uniform.

Selection of the psychiatric aides for 1956—Heyward J. Craft, men’s service, Columbia Division, and Mrs. Hattie C. Bossard, women’s service, State Park Division. Chosen for honorable mention—Miss Ethel E. Hammond, women’s service, and Martin V. Hutto, men’s service, Columbia Division; Mrs. Bennie Ruth Harp, women’s service, and William H. Spear, men’s service, State Park Division.

Presentation by hospital superintendent of service pins and certificates.

Columbia Division

There was participation by the nurses and aides in all ward therapy, volunteer activities and various programs for the patients. They assisted with “Open House” observance, and conducted through the hospital the many school and college groups, as well as other visitors.

Ward personnel attended regular conferences and group meetings with hospital officials.

A three day refresher course on Disaster Nursing, sponsored by District 3, S. C. State Nurses Association, held in the Benet Auditorium, Columbia Division, in March 1957, was well attended.

Several of the nursing staff attended various State and local conventions.

State Park Division

New programs at this division emphasized an in-service training program, better grooming of the patients and more industrial therapy opportunities.

Bimonthly conferences of the graduate nurses were begun with varied and informal discussions, ranging from admission procedures, etc., to a study of the newer tranquilizing drugs, their uses and dangers. Similar conferences were also held for the senior psychiatric aides. Such meetings enabled the personnel to become more thoroughly acquainted with hospital policies, new procedures and techniques.

In like manner, physicians and supervisors were able to secure suggestions directly from the ward personnel.

When particular problems arose, or there were new ones, organized conferences were held on individual wards or with special groups.

PSYCHIATRIC AIDE CHANGE OF TITLE AND UNIFORM REQUIRED IDENTIFICATION BAR

Effective May 13, 1957 the title of attendant was officially changed to that of "psychiatric aide", and the wearing of the proper insignia and identification bar to always be worn while on duty, became a required part of the hospital official uniform.

Inasmuch as the majority of the attendant corps had successfully completed the psychiatric orientation course, the administration took the position that there should be appropriate recognition.

Those who qualified were given the "psychiatric aide" insignia to be sewed in place and worn on the official uniform at all times. Since some employees purchased the old attendant insignia with their uniforms, six of the new emblems were presented to all eligible personnel free of charge. Thereafter, the emblem will be purchased as a part of the uniform. The new insignia is sewed on the left sleeve of the uniform, centered in such manner that the top edge rests two inches below the shoulder seam.

New employees in the aide corps, known as "psychiatric trainees", will wear the designated badge until they qualify as "psy-

chiatric aides" by successfully completing the indicated orientation course. Those successfully completing the advanced course will be given the title of "psychiatric technician."

Identification of the personnel is very helpful, not only to patients and relatives, but to other employees as well. Women wear the identification bar on the upper front area of the left side of the uniform. Men wear the bar on the left coat lapel except during excessively hot weather when the coat is not used, then the bar will be worn on the left front upper area of the shirt.

Identification bars are issued free of charge. In the event an employee remains in the service of the hospital less than one year, the sum of sixty cents, the cost of the name bar, will be deducted from the final pay check. If the employee serves the hospital longer than one year, no deduction will be made for the identification bar.

CHOSEN PSYCHIATRIC AIDES FOR 1956 HONORED

The selection committees of both divisions of the hospital with Dr. Lawson H. Bowling, clinical director, Columbia Division, and Dr. Sol B. McLendon, clinical director, State Park Division, as chairmen, made the following selections for psychiatric aides for the year 1956:

Columbia Division—Heyward J. Craft

State Park Division—Mrs. Hattie C. Bossard

Two other psychiatric aides from each division chosen for special recognition of outstanding performance and skills in their work were:

Columbia Division—Miss Ethel E. Hammond and Martin V. Hutto

State Park Division—Mrs. Bennie Ruth Harp and William H. Spear

Outstanding psychiatric aides in public hospitals for the mentally ill and the mentally handicapped throughout the United States and its territories were acclaimed during National Mental Health Week with the granting of Awards for Achievements and appropriate certificates by the National Association for Mental Health.

Identical awards were made to the individual psychiatric aide nominated by each hospital in accordance with the governing

rules. The awards were distinctively designed gold pins, and the National Association for Mental Health Certificates of Achievement.

The qualifications for such awards are:

Examples of unusually outstanding services performed in behalf of patients during the past year—or—

A record of sustained superior performance rendered throughout a long period of services to the patients.

Evidences of skill, initiative and imagination shown in the discharge of their duties.

Indications of kindness and devotion to the patients in their care.

Citizenship as demonstrated by their off-duty participation in the life of the hospital and of the community.

Courtesy and understanding.

Application and appreciation of learning and educational opportunities offered by the hospital.

Nominees are selected with major emphasis on the extent to which attitudes, abilities and accomplishments are most representative of the collective achievements rendered by the entire group toward the better ward care and well being of their patients during the past year.

Nominations for the awards may be made by patients, personnel, volunteer workers, visitors and friends of the hospital, and are channeled to a selection committee appointed by the hospital superintendent.

The purposes of the awards are: To focus public attention on the important role played by psychiatric aides in the treatment and care of the mentally ill. To help gain adequate recognition and acceptance of those engaged in the profession. To encourage the promotion of higher standards of on-the-ward care.

The S. C. Association for Mental Health has worked very closely with the hospital in one of the projects of sponsoring the annual selection of outstanding psychiatric aides.



PSYCHIATRIC ACHIEVEMENT AWARDS PRESENTED

COLUMBIA DIVISION

Selected psychiatric aides for 1956, Columbia Division, who were presented psychiatric achievement awards by James H. Simkins of Greenville, president, S. C. Association for Mental Health, in ceremonies in the Benet Auditorium on Sunday, April 28, 1957.

Left to right: Martin V. Hutto and Miss Ethel E. Hammond selected for honorable mention; and Heyward J. Craft chosen as the outstanding psychiatric aide of the year at that division.

—Photo by Jimmy Price Studio

COLUMBIA DIVISION CEREMONIES PSYCHIATRIC AIDES AND VOLUNTEER WORKERS

On Sunday afternoon, April 28, 1957, in the Benet Auditorium, Columbia Division, the hospital and the S. C. Association for Mental Health honored the volunteer workers and the Columbia Division psychiatric aides of the year 1956.

The ceremonies signaled the beginning of State wide observance of National Mental Health Week when the mental health program is emphasized and every opportunity afforded for the public generally to secure information referable to mental illness, the prevention, and facilities for the care and treatment of the mentally ill.

The chosen psychiatric aide selected at the Columbia Division was Heyward J. Craft, at the hospital since August 1946, and those chosen for special mention were Miss Ethel E. Hammond and Martin V. Hutto.

In this second recognition of the psychiatric aides (the first was Mrs. Wilma B. Jeffcoat) and the first of the volunteer workers, the following program was presented:

PROGRAM

Presiding	Hon. George A. Buchanan, Jr. Chairman, S. C. Mental Health Commission
Prelude	Patients' Choir Mrs. Ernestine M. Owen, Director "Heavenly Light"—Shubert "Its With All Your Heart"—Mendelssohn
Invocation	Rev. Robert O. Barker Superintendent of Missions Fairfield Baptist Association
Welcome	William S. Hall, M.D. Superintendent, S. C. State Hospital
Special Music.....	Miss Ann W. Howe, Director, Music Therapy Madam Tremblay-Baker, Professor Piano and Theory, University of South Carolina "Sonata in D. Major" (Adagio)—Handel Piano and Violin
Presentation of Certificates to Representatives of Twenty-seven Columbia Area Churches	Lawson H. Bowling, M.D. Clinical Director, Columbia Division

Presentation of Special Awards to Three

Members, Community Advisory

Committee on Volunteer Services.....William S. Hall, M.D.

Mrs. J. W. Haltiwanger, Jr.,

Mrs. W. A. Hart and Mrs. O. B. Mayer

Special MusicPatients' Choir

"Take My Life and Let It Be"

Presentation of Awards to Psychiatric

Aides of 1956James H. Simkins, Greenville, S. C.

President, S. C. Association for Mental Health

Aide of the YearHeyward J. Craft

Psychiatric Achievement Award. A certificate and a
gold pin from the National Association for Mental
Health, and a plaque from the S. C. Association for
Mental Health.

Honorable MentionMiss Ethel E. Hammond

Martin V. Hutto

Psychiatric Achievement Award Plaques

Introduction of Speaker.....W. P. Beckman, M.D.

State Director of Mental Health

AddressJames W. Jackson, D.D.

Pastor, First Presbyterian Church

"The Healing Power of Helping Hands and Loving Hearts"

BenedictionChaplain William M. Major

Columbia Division, S. C. State Hospital

Refreshments

On Lawn Opposite the Benet Auditorium

Serving

Mrs. W. P. Beckman

Mrs. George A. Buchanan, Jr.

Mrs. Lawson H. Bowling

Mrs. Glenn B. Carrigan

Mrs. Joe E. Freed

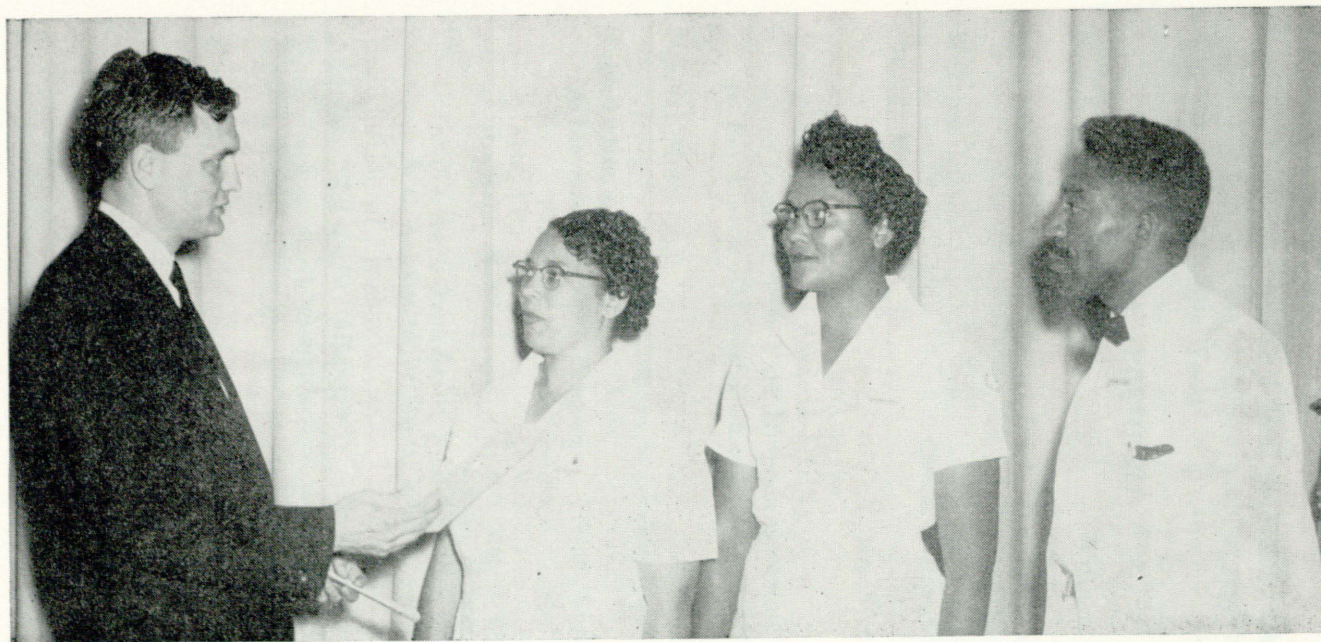
Mrs. William S. Hall

Mrs. Sol. B. McLendon

Assisted by Corps of Psychiatric Aides

STATE PARK DIVISION CEREMONIES

On Sunday afternoon, May 6, 1957, in the Fisher Auditorium, State Park Division, the chosen psychiatric aide for 1956, Mrs. Hattie C. Bossard, who had been at the hospital since January 1941, and the two selected for special mention at that division, Mrs. Bennie Ruth Harp and William H. Spear, were honored by the hospital and the S. C. Association for Mental Health.



PSYCHIATRIC ACHIEVEMENT AWARDS PRESENTED

STATE PARK DIVISION

Rev. Larry A. Jackson of Florence, vice-president, S. C. Association for Mental Health, presenting psychiatric achievement awards for the year 1956 in the Fisher Auditorium, State Park Division, on Sunday, May 5, 1957.

Left to right: Rev. Jackson; Mrs. Hattie C. Bossard, chosen as the outstanding psychiatric aide of the year at that division; and Mrs. Bennie Ruth Harp and William H. Spear, who were selected for honorable mention.

—Photo by Jimmy Price Studio

This was the first time an aide at the State Park Division had been so honored, and the occasion was an appropriate climax for National Mental Health Week.

PROGRAM

Presiding William S. Hall, M.D.
 Superintendent, S. C. State Hospital

Invocation Chaplain Collie L. Moore
 State Park Division

Welcome Sol B. McLendon, M.D.
 Clinical Director, State Park Division

Special Music Patients' Choir
 Mrs. Ethel Wilson, Director

"A Prayer"

Presentation of Special Awards—(Gifts of
 silver from the State Park Division personnel)
 to Psychiatric Aides of 1956 Rev. C. J. Whitaker
 State Park Division

Special Music Patients' Choir
 "Make Me a Blessing to Someone Today"

Presentation of Psychiatric Aide

Achievement Award Plaques Rev. Larry A. Jackson,
 Florence, S. C., Vice-President, S. C. Asso. for Mental Health

Aide of the Year 1956 Mrs. Hattie C. Bossard

Honorable Mention Mrs. Bennie Ruth Harp
 William H. Spear

Psychiatric Achievement Award Plaques from the
 S. C. Association for Mental Health.

Introduction of Speaker Chaplain Collie L. Moore

Address—"All God's Children" Arthur D. Green, D.D.
 Academic Dean, Allen University, Columbia, S. C.

Special Music Patients' Choir
 "Amen"

Benediction Chaplain A. W. Harley
 Pineland, A State Training School

Reception—Library

Serving—Corps of Nurses and Aides

NURSING EDUCATION SERVICE

During the year 1956-1957 four classes of student nurses completed the affiliate course in psychiatric nursing offered by the South Carolina State Hospital. These are represented in the following chart:

Group	Began	Ended	Number of Students	Hospitals Represented
25	July 2, 1956.....	September 23, 1956.....	63	11
26	October 1, 1956.....	December 23, 1956.....	57	10
27	January 6, 1957.....	March 31, 1957.....	63	11
28	April 8, 1957.....	June 30, 1957.....	62	11
Total.....			245	

Each of the above classes remained for 12 weeks, during which time each was given 84 hours of clinical experience and approximately 110 hours of theory.

Nursing Education Staff

Mrs. Jane F. Bouknight, R.N., resigned as clinical nursing supervisor, effective Wednesday, November 28, 1956, because her husband was transferred to Atlanta, Georgia.

On Monday, April 1, 1957, Mrs. Lilyan R. Klein, R.N., assumed her duties as psychiatric nursing instructor in this service.

Continued requests for the admission of larger classes of student nurses emphasize the need for a much increased staff of nursing instructors and supervisors to maintain desirable standards of efficiency both in nursing education and clinical practice.

Special Activities of the Director of Nursing Education

August 5-19, 1956 the director of nursing education was on military leave for active duty at Fort Benning, Georgia.

On Tuesday, September 25, 1956 she met with the faculty of the Greenville General Hospital School of Nursing to discuss their program with special consultants from the National League for Nursing referable to their application for full accreditation. In April 1957 information was received that full accreditation for the education program under the criteria established by the National Nursing Accrediting Service had been granted the Greenville General Hospital School of Nursing.

October 16-18, 1956 with several members of the South Carolina State Hospital professional staff, a visit was made to Atlanta, Georgia, to study and evaluate the Public Health Nursing Program inaugurated in Georgia for patients permitted to leave a mental hospital to benefit from the services of Public Health nurses. Mental hospitals also benefit from this program.

March 26-29, 1957 attended a regional conference on psychiatric nursing, sponsored by the Southern Regional Board of Education, at Western Hills Lodge, Sequoyah State Park, Oklahoma. On May 31, 1957 a follow-up meeting of the steering committee was attended in Atlanta, Georgia.

April 25-26, 1957 the director of nursing education participated in a Psychiatric Nursing Institute in Augusta, Georgia. She was a leader for a group discussing "How to Improve Communication between Patient and Nurse", and on a panel discussing "Trends in Education for Psychiatric Personnel — Aide Training."

Professional Meetings Attended

October 10-12, 1956 attended the annual meeting of the South Carolina State Nurses Association in Charleston, S. C., where she was elected president, to assume office in October 1957 for a term of two years.

The director of nursing education also attended the National League for Nursing in Chicago, May 6-10, 1957.

Visitors

Monday, February 25, 1957 the hospital was visited by Miss Amy E. Viglione, who had since January 15, 1957 been exploring resources in South Carolina for the development of a four year program of college education in nursing to serve this State. Miss Viglione has had extensive experience in teaching. Until 1951 she served as nurse education consultant in the U. S. Public Health Service, and since then has been associate director of the nursing division at the W. K. Kellogg Foundation, Battle Creek, Michigan.

On April 23-24, 1957 the nursing education service and the entire hospital were visited by Miss Tirzah Morgan, R.N., psychiatric nurse consultant, National Institute of Mental Health, Be-

thesda, Maryland, and Miss Kathryn Fritz, R.N., mental health nurse consultant, U. S. Public Health Service, Region 4, Atlanta, Georgia.

Recommended that:

1. A psychiatric nursing affiliation program for Negro student nurses be inaugurated as soon as feasible at the State Park Division of the S. C. State Hospital.
2. As soon as funds and personnel can be secured, the present staff of the nursing education service be increased and strengthened in order to meet the demands for increased enrollment of nursing classes.
3. Continued efforts for more effective communication between the S. C. State Hospital and the home schools for continuity in learning experiences and preparation of the student for this particular aspect of nursing education.
4. All affiliating schools send a representative group to this hospital to evaluate the program from the standpoint of teaching facilities, learning experiences, and the social life of the student nurse.
5. As soon as additional personnel can be secured, the director of nursing education visit the eleven affiliating schools more frequently in order to insure a better understanding by the school personnel of the total educational program offered here.

RESEARCH ACTIVITIES

The National Institute of Mental Health, Department of Health, Education and Welfare, U. S. Public Health Service, Bethesda, Maryland, advised that the National Advisory Mental Health Council at the meeting June 17-19, 1957 approved the application made by the South Carolina State Hospital on February 26, 1957 for a mental health project grant (OM 54).

When the \$280,000.00 five year grant is awarded the funds will be utilized for the development of multidisciplinary treatment, training and research activities at the hospital.

Within the very near future application will be made to the National Institute for Mental Health for another research grant for the establishment of a pilot psychiatric social service pro-

gram for the purpose of conducting studies along the lines of "community planning for patients on conditional discharge (trial visit) status from the South Carolina State Hospital."

PSYCHOLOGY SECTION

The long process of adding and improving new psychological services within the hospital's total effort proceeded slowly with some evidences of success in: (a) psychotherapy; (b) intern and practicum training; (c) research in treatment services; (d) staff development; (e) teamwork improvement; (f) in-service and affiliate nurse education; (g) inter-institutional collaborations.

(a) Group psychotherapy continued on the "model" ward and was begun on the men's service admission ward, Williams Building, Columbia Division. Individual psychotherapy with a limited number of patients continued. Ward meetings continued to encourage patient responsibility and remotivation to social participation. Work with the alcoholics group continued.

(b) Prospects for attracting new interns are contingent on the development of a stimulating professional program, and every endeavor is being made to develop these essential activities.

Dr. Wallace A. Kennedy who completed his internship here a year ago, returned to the Florida State University as a member of the Child Development faculty. He and Chairman Waskom of the Florida State University Psychology Department indicate their interest in renewing the internship arrangement. They like the "social" rehabilitative emphasis and the cooperative internship by commission-clinic-hospital.

Meanwhile several University of South Carolina graduate students did practicum, psychiatric aide, research work at the hospital. Mrs. Josephine P. Hyatt was a regular practicum student from February 1, with the expectation of completing the work in August 1957, under the supervision of Dr. Gynther. Students of Dr. Martin's class in "Counseling and Psychotherapy" took part in supervised interviewing during the year and will continue to do so in the coming year.

(c) In late June the National Institute of Mental Health advised that the National Advisory Mental Health Council had recommended approval of the application for a grant in support of

a project entitled "Developing a Multidisciplinary Treatment, Training and Research Setting" in the amount of \$280,000.00 over a five year period.

The inaugurating of this project, underway for more than a year on the hospital's "model" ward, can now be undertaken with more vigor with the employment of various personnel to help make the "therapeutic community" setting more remotivational by sponsoring and aiding patient growth along lines of new functions and roles. The treatment aspect of this undertaking attempts to employ more of the findings of social science by encouraging appropriate participation of the patients in a variety of activities which provide increasing personality integration, confidence and self respect through social interaction.

The training aspects of the project are centered on bringing in new treatment talents, and assisting in collaborative use of the skills already here, including the skills of patients.

The research aspect of the effort is geared to determining which sorts of efforts are effective, and to show just where the major difficulties to rehabilitation exist, both within the individuals and in the social structure of the ward and the hospital setting.

(d) Negotiations are in progress with several clinical and social psychologists, sociologists and anthropologists. To build a high calibre professional staff there necessarily must be offered reasonable assurance of freedom to take part in progressive and creative clinical work, and in evaluations of methods as they are tried here and elsewhere. A number of men are interested, but as yet the psychology staff has not been kept to the maximum, there having been two separations during the year: Dr. Donald W. Stilson left to become coordinator of research at the University of Colorado; and Mrs. Ruth Gynther resigned for a temporary absence because of her physical condition.

The setting is being developed to the point where a variety of social scientists and trainees can be attracted and retained.

(e) Several conferences or staffs are currently meeting at regular intervals to plan efforts along the most effective treatment lines. This aspect of psychological service is found by many administrators to be beneficial to effectiveness as well as to morale, and serves as a creator of constant stimulation and learning for all participants. Nursing conferences and auxiliary therapists conferences are among those being sponsored and studied.

(f) In-service training for nurses is being aided partly as stated above, and partly by lectures in formal programs, including those for student affiliates and psychiatric aides. On the ward clinical supervision with student nurses and others is planned.

(g) Early negotiations with leaders at the State Park Division have been made with the intention of developing a broader and more varied set of psychological services at that division. Dr. Boris Gertz has been assisting with these services, and will be aided by others in developing the program.

(h) Inter-institutional collaboration is being urged by the Southern Regional Educational Board and by various educational and mental health advisory groups. The hospital psychology section has worked with the S. C. Mental Health Commission and the Richland County Mental Health Clinic to provide a setting for psychology internships; and this effort is being renewed with more vigor now that there is a more accredited setting.

Relations with the University of South Carolina make possible the offer of practicum and other training opportunities to doctoral candidates in psychology and to students in sociology, and possibly in education. There is the possibility of cooperative staff work with the Columbia College, and reciprocal benefit from use of student-volunteers at the hospital, or faculty research. There is some chance of attracting a doctoral or post-doctoral research worker from the University of North Carolina Institute for Social Research.

On May 7, 1957 the annual Clinic Day was held in the Preston and Cooper Buildings, men's service, Columbia Division, with about 225 psychology students present. During the year many such students visited the hospital at various times.

Dr. Stilson presented a paper at the Southeastern Psychological Association meeting in Nashville, Tennessee. Dr. Martin participated in the mental health movement considerations of this organization, and he also addressed the S. C. League of Nursing. Others in this section, including Mrs. Ruth Gynther and Dr. Gertz, appeared before the various civic clubs. Charles H. Presher and Dr. Martin were consultants during the State Conference of Social Workers, and with various other groups.

Among the many psychologists and sociologists who visited the psychology section were Robert Pace, E. Pendleton Banks and George Bach, all authors in the field of treatment rehabilitation. Dr. John McMillan of the National Institute of Mental Health, Bethesda, Maryland, was a visitor in connection with small research studies. Dr. C. H. Calhoun, United States Public Health Service, Atlanta, Georgia, came as a regular consultant on professional problems.

Recent publications include:

Stilson, Donald W., Gynther, Malcolm D. and Gertz, Boris. Base Rate and the Archimedes Spirial Illusion. *Journal Consult. Psychology*. 1957. 21, in press.

Stilson, Donald W., Mason, D. J., Gynther, Malcolm D., and Gertz, Boris. The Comparability and Reliabities of Two Behavior Rating Scales for Psychiatric Patients. *Journal Consult. Psychology*. 1958. 22, in press.

Stilson, Donald W. and Gertz, Boris. The Reliability of the Hospital Adjustment Scale as a Function of Amount of Rater Observation. In preparation.

Martin, Elmore A. and Hill, W. F. Toward a Theory of Group Development. Six Phases of Therapy Group Development. *International Journal Psychotherapy*. Jan. 1957.

Gynther, Ruth. The Effects of Anxiety and of Situational Stress on Communicative Efficiency. *Journal Abnormal and Social Psychology*. 1957.

Mason, Donald J. Judgments of Leadership Based upon Physiognomic Cues.

SEMINAR FOR PSYCHOLOGY STUDENTS

On July 18, 1956 a seminar was conducted in the club room, Fisher Auditorium, State Park Division, for thirty-five students attending a graduate workshop at the Orangeburg State College, Orangeburg, S. C. Participating were Dr. Irene M. McFarland and Dr. Helen M. Williams of the medical staff, Floster L. Ellison, Jr., social worker, and Chaplain Collie L. Moore.

VISITS OF GENERAL ASSEMBLY MEMBERS

Members of the General Assembly of South Carolina individually visited the hospital and indicated keen interest in the ef-

forts for the welfare of the patients, and in the facilities being provided for increased services for the mentally ill.

THIRD AND FOURTH SERVICE AWARD PROGRAMS

On September 20, 1956 and again on March 7, 1957 the hospital superintendent, Dr. William S. Hall, in the third and fourth groups of ceremonies honored the hospital personnel with continuous service emblems and certificates.

In each ceremony, two in the Benet Auditorium, Columbia Division, and two in the Fisher Auditorium, State Park Division, Dr. Hall recognized the total of one hundred and twenty-one employees and commended their loyalty to duties and responsibilities, and cooperation in efforts to provide the best possible care for the more than six thousand mentally ill patients intrusted to their care. This devotion to duty and endeavors toward efficiency have enabled the hospital to reach a standard of excellence in caring for the patients.

In April 1955 Dr. Hall initiated this recognition and appreciation of continuous service rendered by the South Carolina State Hospital personnel, and the emblem is recognized as a tribute to service and dependability.

The emblem, either a pin or lapel button, designed by the personnel director, John W. Whitehouse, has in red enamel a replica of the Administration Building, Columbia Division. For five years the emblem is silver. The others are gold with the designated jewel indicating the years devoted to the hospital: ten years, pearl; twenty, ruby; thirty, sapphire; and diamond for completion of forty years continuous hospital service.

Service Awards September 20, 1956

In the Benet Auditorium, Columbia Division, and the Fisher Auditorium, State Park Division, on September 20, 1956 the superintendent presented service emblems to fifty-seven employees in the third group.

The diamond emblems for forty years service were given to Miss Beulah L. Gardner, R.N., director of nursing service, James C. Frick, night supervisor, men's service, Columbia Division, and Harry C. Allison, chief X-ray technician.

Mrs. Beulah F. Days, senior hospital aide, women's service, State Park Division, was the only recipient of the diamond emblem at that division.

Sapphire emblems for thirty years service were presented to Dr. Elmer W. Long, men's service, Martin A. Shealy, engineering division, David H. Dye and Dalton C. Tidwell, men's service, of the Columbia Division.

Ezel Boular, dietary division, State Park Division, received a sapphire emblem.

There were no awards of the ruby emblem, twenty years service, at the Columbia Division.

At the State Park Division the ruby emblem was presented to Odell Harrison, men's service.

Service Awards March 7, 1957

On March 7, 1957 in the fourth group of presentations Dr. Hall honored thirty-three of the personnel in the Benet Auditorium, Columbia Division, and thirty-one others in the Fisher Auditorium, State Park Division, a total of sixty-four.

Henry L. Wolfe, supervisor, men's service, State Park Division, was presented with the diamond emblem for forty years continuous service.

Sapphire emblems for thirty years with the hospital were awarded James M. Rhine, florist, and J. Elbert Kelly, supervisor, men's service, both of the Columbia Division.

There were no thirty years awards at the State Park Division.

Mrs. Eula C. Wise, aide, men's service, Columbia Division, received the ruby emblem, twenty years.

At the State Park Division there were two ruby emblems for twenty years service awarded Mrs. Rosa Shell, women's service, and Ernest Foster, dietary division.

The other personnel in all the ceremonies were presented with the indicated emblems and certificates for continuous service of ten and five years.

A certificate of service accompanied each emblem, a copy of which was placed in the individual's personnel file with the date of award.

OPEN HOUSE NATIONAL MENTAL HEALTH WEEK

As a part of the overall activities during National Mental Health Week, April 28-May 5, 1957, annual Open House was again held at the Columbia and the State Park Divisions.

On Tuesday, April 30, 1957, between 10 and 11:30 a. m. and from 2 to 4 p. m., many from the city, from throughout South Carolina, as well as from distant States, came to secure by personal observation information and knowledge pertaining to the hospital, the many facilities, and efforts in behalf of the mentally ill of South Carolina, and to gain some idea referable to the great needs here.

There was definite indication of an increased awareness of the mental health problems and more interest in securing enlightenment as to the proper attitude toward this type of illness and advancements in the care and treatment of the mentally ill.

At each division of the hospital the numerous visitors were conducted by the nursing personnel, affiliate student nurses, psychiatric aides and others of the hospital personnel through representative sections of every service, the medical and surgical areas, laboratories, dining halls, central kitchen-bakery-cafeteria, and other places of interest.

PALMETTO VARIETY

Since the first issue in June 1954, "Palmetto Variety", the S. C. State Hospital newspaper initiated by the superintendent, continued to increase in size, and in being a source of interesting information and current news from every section of the hospital, as well as of value for ready reference purposes.

There have been favorable comments from hospitals and organizations throughout the United States about this newspaper which is prepared, edited and published by personnel and patients, with the director of recreation therapy as editor.

OTHER MEETINGS AT THE HOSPITAL

On January 17, 1957 at 10 a. m., representatives of the press, TV and radio stations throughout the State met in the Horger Library club room for an orientation talk by the hospital superintendent, who afterwards conducted them on a tour of many

sections and buildings of the Columbia Division. Following dinner in the Food Center cafeteria, Dr. Hall accompanied the group on a visit through the State Park Division.

On February 13, 1957 the School Health Committee, South Carolina Medical Association, met in the Benet Auditorium, Columbia Division, with a program prepared by the chairman, Dr. John R. Paul, Jr., of Charleston, and arrangements made by the chairman, Dr. Hilla Sheriff of Columbia. Dr. Hall extended the welcome, and the guest speaker was Dr. W. W. Bauer, director, Health Education, American Medical Association, Chicago, Illinois. Lunch was served in the Mills Building cafeteria.

BUSINESS MANAGER

On November 17, 1956 the resignation of Lauren W. Shelley, business manager since June 1, 1948, became effective and he left for a position with the South Carolina Development Board.

Effective November 18, 1956 Claude W. Connelley, assistant business manager since April 13, 1953, was appointed by Dr. Hall as acting business manager of the S. C. State Hospital and of Pineland, A State Training School.

It is interesting to note that the first record of a business manager for the hospital appears in the annual report for the year 1914.

In conformity with the resolution of the 1914 General Assembly of South Carolina the hospital superintendent, Dr. T. J. Strait, "with the advice and consent of the Board of Regents", appointed W. Harry Wylie as acting business manager of the Columbia Division and general manager of the farm at State Park. The duties and responsibilities of this position are given in detail in the 1914 report—pages 9, 11, 29 and 99. The business manager's first report states that he was transferred from his position at State Park to the new one in Columbia on April 1, 1914.

Upon the reorganization of the hospital when Dr. C. Fred Williams assumed the position of superintendent in May 1915, Mr. Wylie's title was changed from business manager to director, mechanical department. Page 30, 1915 report.

MUSIC THERAPY

On July 6, 1956 Miss Ann W. Howe, originally from Charleston, S. C., assumed the new position of director of music therapy at the Columbia Division.

With a Master's Degree in Musicology from the Cincinnati University and Conservatory of Music, Cincinnati, Ohio, Miss Howe had training at Duke University Psychiatric Department, Durham, N. C., and Highland Hospital, Asheville, N. C. She had further internship training at the Menninger Foundation and Clinic, Topeka, Kansas, which included additional work at the Topeka State Hospital and the nearby Winter Veterans Administration Hospital. Further training and experience were gained in the music therapy department of the Essex County Overbrook Hospital, Cedar Grove, New Jersey. Prior to reporting for duty here Miss Howe was engaged in a survey of music therapy in nine mental hospitals located in the States of Ohio, Indiana, New York, New Jersey, Michigan and Kansas.

Since the establishment of the hospital and the admission of the first patient in 1828, music has played an important role in the therapy of the mentally ill, and always many pianos and other musical instruments have been available for the use and entertainment of the patients. Now in addition there are TV sets and radios to afford music enjoyment.

For years, under the direction of Professor Ben A. Gardner, there was active patient participation in a band and an orchestra which gave concerts on the grounds several times each week, played on various wards, for the dances, plays and pageants, as well as for the graduation exercises for the School of Nursing.

With the establishment of a formally directed music therapy program under the guidance of Miss Howe another definite forward step is being taken.

The music therapy section of the South Carolina State Hospital offers therapeutic and rehabilitation aid to the patient, and at the same time is a function of the medical staff and a member of the ancillary services.

Music therapy is a prescribed and progressive program aimed at reeducating the patient mentally, physically and socially; developing mental and physical coordination, and giving richer opportunities for healthier social contacts in a normalizing setting.

Music gives an emotional channel for self expression and affords a wholesome outlet for otherwise repressed energy. In line with the general attitude of anticipating recovery, this program assumes that the patient will get well and thus conserve his "work habit."

As basic requirements in the rehabilitation of patients, various activities are arranged in the music therapy schedule. The music therapy club committee of 15 patients, guided by the music therapy director, meet to discuss ways and means of promoting and encouraging equitable relationships between patients and hospital personnel in the establishing of a therapeutic environment. Utilizing group material, functions of the music therapy program include club meetings, weekly ward and dining room music, listening hour, music appreciation, rhythm band, a cap-pella rehearsal, community sings, coached groups, rehearsals with various instruments, in addition to individual lessons. Medical interns, chaplains, affiliate nurses and music therapy trainees have opportunities to test and evaluate music therapy principles in varieties of treatment situations in order to learn their degree of applicability in the treatment program.

The South Carolina State Hospital is one of the few public mental hospitals in the South to have music therapy interns. The training program here accepts students for a six months clinical training internship during which psychiatric nursing classes are attended, assistance given in all areas of the hospital in order to receive a broader ancillary outlook, and opportunities afforded to participate in the research, training and development program to be made possible by the National Institute of Mental Health Grant OM 54.

Certificates of completion are awarded those successfully finishing the course.

Negotiations are in process for liaison between the University of South Carolina and the hospital—the practical music therapy clinical training course with psychiatric patients to be given here to supplement the didactic four year course required by the University and the National Association for Music Therapy for the degree in music therapy.

In the music therapy section is a director and an assistant, with 15 volunteers. During the year 8 patient volunteers contributed

toward stenographic work, sorting music and records, repairing and rebuilding instruments, performing routine responsibilities such as helping with teaching and serving on committees. All of these activities were under the supervision of the music therapy staff, and integrated as a part of the therapeutic program.

Four separate music therapy combos, composed of 3 to 6 patients with a music therapy staff member, visited every ward, of the Columbia Division, with the exception of the Wilson Building, and presented programs in the dining halls of both services. There were 319 group classes conducted and 863 music lessons to individuals. The combo group visited Allan and Saunders Buildings for women, Columbia Division, weekly. A church choir was organized at the Saunders, where there will soon be a music therapy club. Plans are being formulated to give Saunders Building patients music lessons to aid the establishment of socially acceptable behavior, conduct weekly group sessions, and give the individual patient some responsibility within his group.

The South Carolina State Hospital has been complimented by being chosen for the annual conference of the National Association for Music Therapy, Southeastern area, March 7-8, 1958, with sessions in the Benet Auditorium, Columbia Division. Miss Ann W. Howe, director of music therapy, is program chairman and vice president of this organization.

These contributions have been received:

From volunteer workers—Victrolas, records, pianos, sheet music, several instruments, rugs, window drapes, money for tuning several pianos.

The hospital provided—a drum set, amplifier and microphone, auto harp, rhythm band set, and miscellaneous small items.

Library and recreation section donated music, records and various instruments. Occupational therapy section has made several rhythm band instruments, such as cymbals and tambourines.

Talks on music therapy were given at the hospital to: hospital forum and staff; attendants and psychiatric aides; student nurses; student chaplains; student affiliate nurses assigned to music therapy section; medical students; volunteers in this section; groups of music teachers and college students.

Lectures given outside the hospital to: Altrusa Club; Mozart Music Club; Psychology Club, Columbia College; Washington Street Methodist Church; Music Teachers' Association of Columbia; Choral Society of Eau Claire; Columbia College Student Body; Columbia College Alumnae; Limestone College Alumnae; Delta Omicron Alumnae (National Professional Music Fraternity); Chamber of Commerce of Columbia Roundtable; University of South Carolina Symphony Orchestra (Miss Howe, concert meister); Columbia YWCA; the Messiah Group of the First Presbyterian Church; and the Red Rose Club of Lancaster, S. C.

Talks at conferences: Southeastern Chapter, National Association for Music Therapy, Florida State University, Tallahassee, Florida, March 1957—"Music Therapy Today."

National Association for Music Therapy, National Conference, Kellogg Foundation, East Lansing, Michigan, October 1957—"Music Therapy in the South."

37th Anniversary Convention of S. C. Federation of Music Clubs, Orangeburg, S. C., April 12, 1957—"Music in Hospitals."

48th Session, S. C. Conference of Social Work, Columbia, S. C., November 8, 1957—"Music Therapy."

Articles written by the director of music therapy:

Collaborated with reporter referable to articles and pictures in the local newspapers, "The State" and "The Columbia Record."

"Music Therapy in the Psychiatric Hospital Treatment Program" December 1956 issue South Carolina Musicians Magazine. Reprinted in the Music Educator's Magazine.

Content of lecture given at the Music Teachers National Conference, Florida State University, Tallahassee, Florida, published in the American Music Teachers Magazine.

VISITORS

On July 16, 1956 a group representing the Virginia Department of Mental Hygiene and Hospitals, and the Central State Hospital at Petersburg, Va., spent a day here inspecting the ultra modern kitchen-bakery-cafeteria in operation at the Columbia Division since 1954, and regarded as the finest in the

southeast. This was the second such inspection by the Virginia personnel. In the last group were S. A. Taylor, Thos. W. Smith and Dan Wicklin, architects, and Meade L. Westman, director of buildings, Department of Mental Hygiene and Hospitals. The steward from Central State Hospital, F. W. Gwaltney, was unable to make the trip.

On November 30, 1956 special visitors were Dr. James L. Cathel, superintendent, N. C. State Hospital at Butner, N. C., and Messrs. Smith, Pearce and Aiken representing other hospitals in North Carolina, who were on an information seeking tour in several States.

During January and February 1957 the hospital was visited by the personnel of the press, TV and radio stations throughout the State, and by groups from various civic organizations interested in the mental health program.

Throughout the year many groups from schools and colleges came for tours through the hospital and to secure information referable to the mental health facilities and program.

EMPLOYEES' ANNUAL BARBECUE

The annual barbecue and dance sponsored by the Columbia Division personnel were held at Heise's pond on April 25, 1957, with about 350 attending. Music was furnished by the Columbia String Band from the Skyline Club.

HARDEN STREET EXTENSION THROUGH HOSPITAL GROUNDS NEARING COMPLETION

Work on the Harden Street extension through the hospital grounds is progressing satisfactorily, with completion scheduled for late in the summer of 1957.

The route is straight through the hospital grounds from Harden Street at the Southern railroad to the intersection of Colonial Drive at Sligh's Avenue, just below the point where Colonial Drive turns and Farrow Road begins.

On Tuesday, September 20, 1955, the S. C. Mental Health Commission approved a route through the S. C. State Hospital grounds for the Harden Street extension, which for at least 30 years had been in varying degrees of discussion and dispute.

The formal resolution granting a right-of-way for this extension was passed by the Commission on Tuesday, December 13, 1955, and the chairman, George A. Buchanan, Jr., authorized to sign the easement to the S. C. State Highway Department, when approved by the Attorney General.

The resolution made the easement subject to conditions outlined by the S. C. Mental Health Commission and agreed to by the S. C. Highway Department and the Richland County Delegation at a meeting on November 8, 1955.

TUBERCULOSIS SERVICE

With very satisfactory results there was continuance of intensive treatment with chemotherapy, pneumo thorax, pneumo peritoneum and other medication, as well as surgery, in the tubercular patients of both divisions.

	White Men	White Women	Negro Men	Negro Women	Total
Capacity tuberculosis buildings	70	70	50	50	240
Census July 1, 1956	61	34	56	46	197
New Cases	25	4	24	28	81
Returned from trial visit	1	1	....	....	2
Total	87	39	80	74	280
Separations:					
Transferred to other sections of hospital.....	21	5	20	17	63
Trial visits	3	2	....	2	7
Discharged	5	1	3	....	9
Died	5	1	2	....	8
Total	34	9	25	19	87
Census June 30, 1957	53	30	55	55	193
Arrested cases	2	3	107	92	204
Examinations:					
Fluoroscopic	32	292	852	663	1,839
Sputum positive	13	3	87	123	226
X-ray	126	58	190	87	461

The mobile unit of the South Carolina State Board of Health Division of Tuberculosis made the annual visits to the hospital from July 23 through August 21, 1956 for chest surveys with the results on microfilm. A detailed report was submitted to the hospital for indicated treatment.

	White Men	White Women	Negro Men	Negro Women	Total
Examinations	1234	1343	1472	1500	5549

ELECTRO SHOCK THERAPY

	White Men	White Women	Negro Men	Negro Women	Total
Markedly Improved	1	2	....	1	4
Improved	271	323	385	985	1,964
Unimproved	10	93	89	183	375
Total	286	622	480	1,263	2,651

TREATMENT OF SYPHILIS AND NEUROSYPHILIS

During the year 78 patients were treated for syphilis. Of this number 36 received malaria inoculation (12 of these were re-inoculated) with these results:

	White Men	White Women	Negro Men	Negro Women	Total
Remission .....	....	....	....	2	2
Much Improved .....	....	....	4	....	7
Improved	8	....	4	....	12
Unimproved	5	2	2	....	15
Total	13	2	19	2	36

SURGICAL SERVICE

	PATIENTS						EMPLOYEES					
	White Men	White Women	Negro Men	Negro Women	Total		White Men	White Women	Negro Men	Negro Women	Total	
Appendectomy	2	6	2	42	52	..	..	..	..	3	3	
Aspiration, upper leg.....	..	1	..	..	1	..	..	..	..	..	..
Biopsy:												
Breast .....	..	..	..	1	1	..	..	..	..	..	..
Cervix .....	..	12	..	6	18	..	2	..	..	..	2	
Chin and neck .....	..	..	1	..	1	..	..	..	..	..	..
Keloid, shoulder.....	..	..	..	1	1	..	..	..	..	..	..
Neck .....	..	2	..	..	2	..	..	..	..	..	..
Subglossitis .....	..	..	1	..	1	..	..	..	..	..	..
And removal finger.....	..	1	..	..	1	..	..	..	..	..	..
Blood transfusions.....	100	68	30	37	235	3	3	3	3	3	39	
Bronchoscopy .....	..	..	..	1	1	..	..	..	..	..	..
Broncho-esophagoscopy .....	..	..	..	1	1	..	..	..	..	..	..
Cauterization—cervix .....	..	..	..	..	..	..	1	..	..	..	1	
Cecostomy	1	..	..	..	1	..	..	..	..	..	..
Colostomy .....	..	..	..	3	3	..	..	..	..	..	..
Debridement:												
Suturing, laceration of finger.....	1	..	..	..	1	..	..	..	..	..	..
Tenorrhaphy, wrist.....	1	..	..	..	1	..	..	..	..	..	..
Tenorrhaphy & neurorrhaphy, wrist	..	..	..	1	1	..	..	..	..	..	..
Excision:												
Anal fissure.....	..	1	..	..	1	..	1	..	..	..	1	
Cyst:												
Breast .....	..	1	..	..	1	..	..	..	..	..	..
Buttock .....	..	..	..	..	..	1	..	..	..	..	1	
Cheek .....	..	..	1	..	1	..	..	..	..	..	..
Eye	2	..	..	..	2	..	..	..	..	..	..
Neck	1	..	..	..	1	..	..	..	..	..	..
Pilonidal	1	..	1	..	2	..	..	..	..	..	..
Gland, neck.....	..	..	..	1	1	..	..	..	..	..	..
Growth:												
Buttock .....	..	..	1	..	1	..	..	..	..	..	..
Neck .....	..	..	1	..	1	..	..	..	..	..	..
Nose .....	..	..	..	..	..	1	..	..	..	..	1	
Shoulder .....	..	2	..	..	2	..	1	..	..	..	1	
Tongue .....	..	..	..	..	..	1	..	..	..	..	1	
Lesion:												
Ear .....	..	..	..	..	..	1	..	..	..	..	1	
Forehead, plastic surgery.....	2	..	..	..	2	..	..	..	..	..	..
Mole:												
Axilla .....	..	1	..	..	1	..	..	..	..	..	..
Back .....	..	..	..	..	..	1	..	..	..	..	1	
Toenail .....	..	5	..	..	5	1	..	..	..	..	1	
Tumor:												
Below eye.....	..	..	..	1	1	..	..	..	..	..	..
Neck .....	..	..	..	1	1	..	..	..	..	..	1	
Ulcer, behind ear.....	..	..	..	..	..	1	..	..	..	..	1	
Wart, finger.....	..	..	..	..	..	1	..	..	..	..	..
Exploratory laparotomy.....	..	1	..	3	4	..	..	..	..	..	..
Extirpation, cyst, neck.....	..	1	..	..	1	..	..	..	..	..	..
Fenestration, outer layer of skull.....	1	..	..	..	1	..	..	..	..	..	..
Gastrostomy .....	..	2	..	1	1	..	..	..	..	..	2	
Hemorrhoidectomy .....	..	2	..	1	3	1	1	..	..	..	..
Herniorrhaphy	9	7	6	..	22	..	..	1	..	..	1	
Hysterectomy .....	..	4	..	12	16	..	1	..	..	1	2	
Hysterectomy and bilateral salpingo-												
oophorectomy .....	..	1	..	..	1	..	..	..	..	..	..
And salpingo-oophorectomy .....	..	1	..	..	1	..	..	..	..	..	..
Incision:												
Abdominal wall with biopsy of cyst	..	1	..	..	1	..	..	..	..	..	..
Hand .....	..	1	..	..	1	..	..	..	..	..	..
Incision and drainage:												
Abscess:												
Abdominal wall.....	..	1	..	..	1	..	..	..	..	..	..
Arm .....	..	1	..	..	1	..	..	..	..	..	..
Axilla .....	..	1	..	..	1	..	..	..	..	..	..
Breast .....	..	1	..	..	1	..	..	..	..	..	..
Buttock .....	..	1	..	..	1	..	..	..	..	..	..
Elbow .....	..	1	..	..	1	..	1	..	..	..	1	

SURGICAL SERVICE—Continued

	PATIENTS						EMPLOYEES					
	White Men	White Women	Negro Men	Negro Women	Total		White Men	White Women	Negro Men	Negro Women	Total	
Face .....	..	1	..	..	1	..	..	..	..	..	..	..
Rectum .....	..	1	..	..	1	..	..	..	..	..	..	..
Thumb .....	..	1	..	..	1	..	..	..	..	..	..	..
Carbuncle, back.....	..	2	..	..	2	..	..	..	..	..	..	..
Cyst, neck.....	..	1	..	..	1	..	..	..	..	..	..	..
Fistula, ano.....	..	..	1	..	1	..	..	..	..	..	..	..
Gland, chin.....	1	..	..	..	1	..	..	..	..	..	..	..
Infected finger.....	..	2	..	..	2	..	..	..	..	..	..	..
Incision and removal:												
Basal cell, arm.....	1	..	..	..	1	..	..	..	..	..	..	..
Face	1	..	..	..	1	..	..	..	..	..	..	..
Bullet, chest wall.....	..	1	..	..	1	..	..	..	..	..	..	..
Cyst:												
Cheek .....	..	..	..	..	..	..	1	..	..	..	1	..
Finger	1	..	..	..	1	..	..	..	..	..	..	..
Forearm .....	..	1	..	..	1	..	..	..	..	..	..	..
Foreign body, thumb.....	..	..	..	..	..	..	..	1	..	..	1	..
Lip .....	..	..	..	..	..	..	1	..	..	..	1	..
Scalp .....	..	1	..	..	1	..	1	..	..	..	1	..
Scrotum	1	..	..	..	1	..	..	..	..	..	..	..
Fibroma, arms.....	1	..	..	..	1	..	..	..	..	..	..	..
Ganglion, finger.....	..	..	..	..	..	..	1	..	..	..	1	..
Growth:												
Lip	1	1	..	..	2	..	..	..	..	..	..	..
Sternum .....	..	..	..	1	1	..	..	..	..	..	..	..
Mass, breast.....	..	2	..	3	5	..	1	..	..	..	1	..
Maxillary gland.....	..	..	..	..	..	..	1	..	..	..	1	..
Sewing needle, finger.....	..	..	..	1	1	..	..	..	..	..	..	..
Silk sutures in abscess, cavity, abdominal wall.....	1	..	..	..	1	..	..	..	..	..	..	..
Injection, hydrocortisone shoulder joint .....	..	1	..	..	1	..	..	..	..	..	..	..
Mastectomy .....	..	1	..	..	1	..	..	..	..	..	..	..
Pharyngotomy .....	..	..	..	1	1	..	..	..	..	..	..	..
Pinch skin graft, heels.....	1	..	..	..	1	..	..	..	..	..	..	..
Pneumo encephalogram.....	..	..	1	..	1	..	..	..	..	..	..	..
Proctoscopy .....	..	1	..	..	1	1	..	..	..	..	1	..
Proctoscopy and biopsy polyps, rectum	..	..	..	..	..	1	..	..	..	..	1	..
Removal:												
Cervical polyp.....	..	1	..	..	1	..	..	..	..	..	..	..
Cyst:												
Jaw .....	..	..	..	1	1	..	..	..	..	..	..	..
Scrotum	1	..	..	..	1	..	..	..	..	..	..	..
Lesion, behind ear.....	..	..	..	..	..	1	..	..	..	..	1	..
Mass, arm.....	1	..	..	..	1	..	..	..	..	..	..	..
Testicle .....	..	..	1	..	1	..	..	..	..	..	..	..
Toenail .....	..	2	..	..	2	..	..	..	..	..	..	..
Wart, finger.....	..	1	..	..	1	..	2	..	..	..	2	..
Repair, laceration, finger.....	..	..	..	..	..	1	..	..	..	..	1	..
Salpingo oophorectomy and excision, uterine fibroid.....	..	..	..	..	..	..	..	..	..	1	1	..
Salpingo and removal of uterine fibroid	..	..	..	1	1	..	..	..	..	..	..	..
Sterilization .....	..	..	25	25	50	..	..	..	..	..	..	..
Suturing, laceration:												
Elbow	1	1	..	..	2	..	..	..	..	..	..	..
Eyelid .....	..	..	1	2	3	..	..	..	..	..	..	..
Finger	1	..	..	..	1	..	..	..	..	..	..	..
Lip	1	..	..	..	1	..	..	..	..	..	..	..
Nose .....	..	2	..	..	2	..	..	..	..	..	..	..
Scalp	1	..	..	..	1	..	1	..	..	..	1	..
Tongue .....	..	2	..	..	2	..	1	..	..	..	1	..
Wrist—cast applied.....	..	..	1	..	1	..	..	..	..	..	..	..
Thyroidectomy .....	..	1	1	3	5	..	1	..	..	..	1	..
Tracheotomy .....	..	..	..	2	2	..	..	..	..	..	..	..
Transorbital leukotomy.....	..	2	..	9	11	..	..	..	..	..	..	..
Total.....	136	154	50	162	502	15	22	34	7	78		
Obstetrics:												
Spontaneous delivery.....	2	2	..	..	4	..	..	..	..	..	..	..

SURGICAL SERVICE—Continued

ORTHOPEDIC SECTION

	PATIENTS						EMPLOYEES					
	White Men	White Women	Negro Men	Negro Women	Total		White Men	White Women	Negro Men	Negro Women	Total	
Bunionectomy and exostectomy.....	..	1	..	..	1	..	..	..	..	..	..	..
Amputation, leg.....	2	2	4	1	9	..	..	..	1	..	1	..
Re-amputation, leg.....	1	..	..	..	1	..	..	..	..	..	..	..
Application for fracture:												
Brace, cervical vertebra.....	1	..	..	..	1	..	..	..	..	..	..	..
Cast:												
Arm	2	2	..	2	6	..	..	..	..	..	..	..
Arm and hand.....	..	..	..	..	..	..	..	..	1	..	1	..
Foot	1	2	..	..	3	..	..	..	..	..	..	..
Hand .....	..	1	..	..	1	..	..	..	1	..	1	..
Humerus	2	2	..	1	5	..	..	..	..	..	..	..
Leg	2	2	..	4	8	..	..	..	2	..	2	..
Cast, well traction and pins, hip....	..	1	..	1	2	..	..	..	..	..	..	..
Closed reduction and application of cast:												
Arm	8	9	2	8	27	..	..	..	..	..	..	..
Arm and hand.....	1	..	..	..	1	..	..	..	..	..	..	..
Arm and shoulder.....	..	..	..	1	1	..	..	..	..	..	..	..
Elbow	2	..	..	1	3	..	..	..	..	..	..	..
Fibula .....	..	..	1	1	2	..	..	..	1	..	1	..
Finger .....	..	..	..	1	1	..	..	..	..	..	..	..
Foot	1	1	..	..	2	..	..	1	..	..	1	..
Hand	1	..	..	..	1	..	..	..	..	..	..	..
Humerus	1	7	..	3	11	..	..	..	..	..	..	..
Leg	1	1	..	..	2	..	..	..	..	..	..	..
Radius	1	..	..	..	1	..	..	..	..	..	..	..
Radius and ulna.*.....	1	..	..	..	1	..	..	..	..	..	..	..
Wrist	1	1	..	..	2	..	..	..	..	..	..	..
Well leg traction												
hip .....	..	2	..	..	2	..	..	..	..	..	..	..
Leg .....	..	1	..	..	1	..	..	..	..	..	..	..
And pins, hip.....	1	2	..	..	3	..	..	..	..	..	..	..
Debridement:												
Closure re-amputation												
leg	1	..	..	..	1	..	..	..	..	..	..	..
Distal phalanx finger.....	..	1	..	..	1	..	..	..	..	..	..	..
Sores, foot.....	..	..	1	..	1	..	..	..	..	..	..	..
Incision and removal:												
Pins:												
Hand	1	..	..	..	1	..	..	..	..	..	..	..
Hip .....	..	2	..	..	2	..	..	..	..	..	..	..
Manipulation dislocated shoulder.....	..	1	..	..	1	..	..	..	..	..	..	..
Open reduction and biopsy of bone and tissue:												
Leg .....	..	..	..	..	..	..	..	..	1	..	1	..
Open reduction and fixation:												
Blade plate:												
Hip	5	9	4	1	19	..	..	..	..	..	..	..
Leg	1	..	..	..	1	..	..	..	..	..	..	..
Pins, hand.....	1	..	..	..	1	..	..	..	..	..	..	..
Screws, ankle.....	..	2	..	1	3	..	..	..	..	..	..	..
Open reduction, fracture:												
Ankle .....	..	1	..	..	1	..	..	..	..	..	..	..
Hip	7	7	..	..	14	..	..	..	..	..	..	..
Open reduction and removal:												
Acromion, shoulder.....	1	..	..	..	1	..	..	..	..	..	..	..
Prosthesis, hip.....	1	..	..	..	1	..	..	..	..	..	..	..
Open reduction and prosthesis:												
Hip	4	7	2	..	13	..	..	..	..	..	..	..
Tenorrhaphy, finger.....	..	..	..	1	1	..	..	..	..	..	..	..
Tenorrhaphy and neurorrhaphy:												
Wrist .....	..	..	1	..	1	..	..	..	..	..	..	..
Reapplication of support (stockinette) shoulder.....	..	..	..	1	1	..	..	..	..	..	..	..

SURGICAL SERVICE—Continued

ORTHOPEDIC SECTION—Continued

	PATIENTS						EMPLOYEES					
	White Men	White Women	Negro Men	Negro Women	Total		White Men	White Women	Negro Men	Negro Women	Total	
Repair, injury, finger.....	..	..	..	1	1		..	..	..	..	..
Ruptured collar bone.....	1	..	..	..	1		..	..	..	..	..
Splint, finger.....	..	1	..	..	1		..	..	..	..	..
Total.....	51	70	15	29	165		..	1	7	..	8	
S. C. PENITENTIARY PATIENTS:												
Laceration, thumb and finger.....	1	..	..	..	1		..	..	..	..	..
Suture and application splint, finger	..	..	1	..	1		..	..	..	..	..
Total.....	1	..	1	..	2		..	..	..	..	..

SURGICAL SERVICE—Continued
UROLOGICAL SECTION

	PATIENTS						EMPLOYEES					
	White Men	White Women	Negro Men	Negro Women	Total		White Men	White Women	Negro Men	Negro Women	Total	
Biopsy penis.....	..	..	1	..	1	..	..	..	..	..	..	..
Catheterizations	1	..	2	..	3	..	..	..	..	..	..	..
Consultations	30	5	3	2	40	1	..	..	..	..	1	..
Cystoscopic examinations.....	8	2	..	..	10	1	..	..	..	..	1	..
Dilatation urethra.....	..	2	..	..	2	..	..	..	..	..	..	..
Epididymectomy and orchiectomy.....	..	..	1	..	1	..	..	..	..	..	..	..
Excision:												
En block, part left scrotum and contents, right epididymectomy	..	..	1	..	1	..	..	..	..	..	..	..
Scrotal cyst.....	..	..	1	..	1	..	..	..	..	..	..	..
Supra pubic fistula.....	1	..	..	..	1	..	..	..	..	..	..	..
Hospital visits.....	93	9	4	4	110	6	2	2	..	..	10	..
Hydrocele .....	..	..	..	..	..	..	..	1	..	..	1	..
Intravenous pyelogram.....	4	..	..	4	8	1	1	1	..	..	3	..
Meatotomy and dilatation urethra.....	1	..	..	..	1	..	..	..	..	..	..	..
Modified Kelly operation urethra.....	..	1	..	..	1	..	..	..	..	..	..	..
Nephrectomy .....	..	..	..	1	1	..	..	..	..	..	..	..
Nephrolithotomy .....	..	..	1	..	1	..	..	..	..	..	..	..
Office visits.....	..	..	1	..	1	20	19	9	..	..	48	..
Removal:												
Kidney stone.....	..	..	..	1	1	..	..	..	..	..	..	..
Tumor kidney region.....	..	..	..	1	1	..	..	..	..	..	..	..
Repair:												
Hydrocele and dilatation ureter....	1	..	..	..	1	..	..	..	..	..	..	..
Resection:												
Segmental bladder.....	1	..	..	..	1	..	..	..	..	..	..	..
Transurethral	2	..	1	..	3	..	..	..	..	..	..	..
Suprapubic prostatectomy.....	1	..	..	..	1	..	..	..	..	..	..	..
Total.....	143	19	16	13	191	29	22	13	..	..	64	..
Individual cases.....	76	11	11	6	104	16	17	8	..	..	41	..
S. C. PENITENTIARY PATIENT:												
Cystoscopic examination.....	1	..	..	..	1	..	..	..	..	..	..	..

SURGICAL SERVICE—Continued
EYE, EAR, NOSE AND THROAT SECTION

	PATIENTS						EMPLOYEES					
	White Men	White Women	Negro Men	Negro Women	Total		White Men	White Women	Negro Men	Negro Women	Total	
EYES:												
Cataract	8	10	10	10	38	..	1	1	..	..	2	
Chalazion .....	..	..	..	1	1	..	..	..	..	..	..	2
Corneal ulcer.....	4	9	10	16	39	1	1	..	..	..	..	2
Dacryocystorhinotomy .....	..	..	1	..	1	..	..	..	..	..	..	..
Enucleation .....	..	..	1	..	1	..	..	..	..	..	..	..
External diseases.....	46	37	48	46	177	26	26	12	8	72		
Eye ground examinations.....	821	645	513	498	2,477	2	3	4	1	10		
Foreign bodies removed.....	1	1	..	..	2	8	..	..	..	8		
Glaucoma	6	16	16	10	48	2	1	..	..	3		
Hordeolum	1	..	..	..	1	..	..	3	..	3		
Injuries	11	4	12	4	31	12	2	2	1	17		
Keratitis uveitis .....	..	5	11	12	28	10	1	5	..	16		
Post operative care.....	1	..	6	2	9	2	2	..	..	4		
Pterygium .....	..	..	..	1	1	1	1	..	..	2		
Refractions	184	276	39	137	636	24	72	42	68	206		
Routine inspections.....	1,119	1,015	672	713	3,519	84	121	78	105	388		
Slit lamp examinations.....	4	6	2	..	12	..	1	..	..	1		
Visual fields.....	..	4	2	5	11	..	..	..	..	..
Total	2,206	2,028	1,343	1,455	7,032	172	232	147	183	734		
Glasses furnished by the South Carolina State Hospital.....	23	40	7	45	115	1	2	3	1	7		
EARS:												
Audiometer test.....	8	4	6	8	26	..	2	..	..	2		
Cerumen removed.....	18	14	1	5	38	5	16	1	..	22		
Foreign bodies removed.....	1	6	1	5	13	..	..	..	..	..
Injuries .....	..	1	..	2	3	..	..	..	..	..
Irrigations	14	11	1	7	33	2	18	2	2	24		
Otitis externa.....	21	32	13	22	88	3	35	1	2	41		
Otitis media.....	44	58	27	44	173	11	36	13	..	60		
Routine examinations.....	1,187	1,119	726	785	3,817	179	207	126	141	653		
Total	1,293	1,245	775	878	4,191	200	314	143	145	802		
NOSE AND THROAT:												
Allergy .....	..	1	..	..	1	1	13	..	1	15		
Epistaxis	4	5	3	..	12	4	..	3	..	7		
Foreign bodies removed.....	..	1	..	..	1	2	..	..	..	2		
Injuries	2	5	3	1	11	..	6	..	..	6		
Laryngitis	6	1	2	..	9	3	5	..	2	10		
Naso-pharyngitis	28	33	12	13	86	45	103	11	9	168		
Peritonsillar abscess.....	..	..	..	..	..	..	1	..	..	1		
Post operative care.....	..	1	1	..	2	..	..	..	..	..
Routine examinations.....	738	776	453	568	2,535	80	187	102	123	492		
Sinusitis	11	26	4	4	45	19	50	2	3	74		
Tonsillitis	4	7	3	3	17	9	15	5	1	30		
Total	793	856	481	589	2,719	163	380	123	139	805		

ADJUNCTIVE CLINICAL ACTIVITIES

Laboratory Section

Columbia Division:

The work in every phase of laboratory procedures increased to keep pace with the admission of patients, the increase in personnel and the endeavors to cooperate with medical staff in the care of the patients.

Because of illness Miss Helen Benton, technician, resigned and left on November 22, 1956.

Julius Spradley was added to the laboratory staff as a trainee on December 17, 1956.

Howard W. Paschal, chief clinical laboratory technician, spent the month of March 1957 at the Communicable Disease Center, Chamblee, Georgia, taking an intensive course in serologic methods and the diagnosis of parasitic and mycotic infections.

State Park Division:

The same increase in work for the State Park Division and Pineland, A State Training School, occurred.

Walser McLendon, clinical laboratory technician, was away for a month in November and December 1956 taking a special course in laboratory methods and medical mycology at the Communicable Disease Center, Chamblee, Georgia.

Total examinations			61,259
	<i>Columbia</i>	<i>State Park</i>	
	<i>Division</i>	<i>Division</i>	<i>Total</i>
Bacteriology	-----	-----	1,810
Fungi	-----	25	-----
Cultures	688	19	-----
Smears	281	510	-----
Sensitivity test	56	4	-----
Bacteria counts (milk)	219	-----	-----
Specific gravity pleural effu- sion	-----	1	-----
Semen count	-----	1	-----
Skin scrapings	-----	5	-----
Nail scrapings	-----	1	-----
Chemistry	-----	-----	7,825
Glucose	2,640	430	-----
Bromides	1,639	2	-----

Non-protein nitrogen.....	1,458	85	-----
Creatinine	20	2	-----
Urea nitrogen.....	133	368	-----
Total protein (blood).....	27	-----	-----
Total protein (spinal fluid)....	775	-----	-----
Icterus index	23	12	-----
Van den bergh.....	7	-----	-----
Chlorides	4	-----	-----
Cholesterol	4	2	-----
Gastric analysis.....	10	6	-----
Prothrombin time.....	26	2	-----
Uric acid.....	2	-----	-----
Glucose (spinal fluid).....	5	-----	-----
Butter fats.....	82	-----	-----
Urobilinogen	1	12	-----
Cephalin-flocculation	6	-----	-----
Levenson's test.....	-----	1	-----
A/G ratio	26	-----	-----
Pandy's (spinal fluid).....	2	-----	-----
C. O. ² (combining power).....	1	-----	-----
Glucose tolerance.....	-----	3	-----
Spinal fluid (chloride).....	-----	4	-----
Plasma (chloride).....	-----	1	-----
Thymol turbidity.....	2	-----	-----
Serum amylase.....	1	-----	-----
Calcium	1	-----	-----
Hematology			30,917
R. B. C.	184	28	-----
W. B. C. (blood)	3,785	2,012	-----
W. B. C. (spinal fluid)	199	578	-----
Hgb	3,626	2,346	-----
Differential count.....	3,757	1,925	-----
Bleeding time.....	8	6	-----
Coagulation time.....	8	7	-----
Sedimentation rate.....	3,824	2,233	-----
Hematocrit	3,902	2,300	-----
Sickle cell.....	153	18	-----
Reticulocyte count.....	6	-----	-----
Platelet count.....	4	4	-----

Histoplasma capsulation.....	-----	1	-----
L. E. Cell preparation.....	-----	3	-----
Color index.....	1	-----	-----
Parasitology.....	-----	-----	5,171
Blood (feces).....	32	7	-----
Ova and parasites.....	2,976	2,137	-----
Bile.....	5	12	-----
Malaria.....	1	-----	-----
Mucus.....	1	-----	-----
Urinalysis.....	-----	-----	5,953
Complete (color, reaction, sp. gr. sug. alb., micro.).....	3,532	2,268	-----
Acetone.....	97	35	-----
Blood.....	2	-----	-----
Urine sugar.....	-----	5	-----
Bence-Jones protein.....	-----	3	-----
Diacetic acid.....	-----	7	-----
Lignin test.....	-----	4	-----
Serology.....	-----	-----	9,574
Flocculation (blood).....	2,953	2,441	-----
Flocculation (spinal fluid).....	849	-----	-----
Complement fixation (blood).....	352	-----	-----
Complement fixation (spinal fluid).....	884	-----	-----
Colloidal gold.....	865	31	-----
Type and RH.....	448	122	-----
Cross match.....	472	148	-----
Agglutinations.....	6	1	-----
Heterophile antibody.....	2	-----	-----
Autopsies.....	-----	-----	9
Complete.....	8	-----	-----
Partial.....	1	-----	-----
Totals.....	41,081	20,178	-----
GRAND TOTAL.....	-----	-----	61,259

X-RAY SECTION

	White Men	White Women	Negro Men	Negro Women	Total
Abdomen,	19	12	9	24	64
Ankle, (left).....	7	44	25	20	96
Ankle, (right).....	15	66	19	32	132
Chest, (P. A.).....	1,220	1,057	792	909	3,978
Colon,	27	26	11	3	67
Elbow, (left).....	21	6	3	10	40
Elbow, (right).....	8	13	2	12	35
Femur, (left).....	2	..	..	..	2
Femur, (right).....	1	5	4	4	14
Foot, (left).....	16	25	7	14	62
Foot, (right).....	18	23	20	14	80
Gallbladder	9	24	1	6	40
Hand, (left).....	23	22	13	15	73
Hand, (right).....	45	24	6	14	89
Hip, (left).....	33	56	12	6	107
Hip, (right)	34	50	12	8	104
Humerus, (left).....	24	17	10	17	68
Humerus, (right).....	18	31	14	13	76
Jaw, (left).....	4	9	2	4	19
Jaw, (right).....	4	5	..	..	9
Kidney, Urinary, Bladder.....	27	12	9	27	75
Knee, (left).....	10	31	10	14	65
Knee, (right).....	12	25	12	10	59
Leg, (left).....	3	7	6	2	18
Leg, (right).....	11	5	9	4	29
Mastoids, (left).....	1	..	..	..	1
Mastoids, (right).....	1	..	..	..	1
Nose,	4	3	8	..	15
Pelvis,	8	15	3	2	28
Pregnancy, .....	..	..	..	2	2
Ribs, (left).....	12	5	4	..	21
Ribs, (right).....	2	3	..	..	5
Sinuses,	14	9	4	2	29
Skull,	154	94	122	82	452
Spine, (cervical)	22	20	7	3	52
Spine, (lumbar).....	74	90	31	15	210
Spine, (thoracic).....	16	56	15	5	92
Stomach,	123	62	40	44	269
Wrist, (left).....	28	18	24	14	84
Wrist, (right).....	30	15	20	24	89
Total X-ray exposures.....	2,100	1,990	1,286	1,375	6,751
Basal metabolism rate.....	1	5	..	..	6
Electrocardiogram	70	42	7	5	124
X-ray treatment (deep therapy).....	..	5	7	..	12
GRAND TOTAL.....	2,171	2,042	1,300	1,380	6,893

ELECTROENCEPHALOGRAPHY SECTION

	White Men	White Women	Negro Men	Negro Women	Total
Electroencephalograms	49	47	20	14	130

DENTAL SECTION

	White Men	White Women	Total	Negro Men	Negro Women	Total
Anesthetics	911	782	1,693	1,608	1,703	3,311
Biopsies .....	....	....	....	2	2	4
Bridges:						
Made	1	....	1	....	....	....
Removed	1	....	1	....	....	....
Dentures:						
Adjusted	46	69	115	....	....	....
Made	16	29	47	3	....	3
Partial made.....	....	1	1	3	....	3
Repaired	17	33	50	....	....	....
Examinations	2,357	2,179	4,536	2,094	1,719	3,813
Extractions	698	623	1,321	1,186	1,222	2,408
Fillings:						
Alloy	38	26	64	1	....	1
Gold inlay.....	1	....	1	....	....	....
Plastic	1	6	7	....	....	....
Porcelain	14	32	46	....	....	....
Reduction and fixation, fractured mandible.....	1	....	1	....	....	....
Treatments	55	50	105	74	65	139
X-ray exposures.....	20	40	60	50	60	110

PHARMACY

During the year there was a slight increase in the number of prescriptions filled in spite of the fact that those for Pineland, A State Training School, were kept separate.

There was a prescription increase of 7,478 at the Columbia Division, and a decrease of 6,362 at the State Park Division.

Prescriptions filled:

Columbia Division	37,051
State Park Division	16,072
Total	53,123

Upon completion of the modern, much expanded quarters on the ground floor of the Administration Building, Columbia Division, the pharmacy was moved in December 1956 from the first floor of that building where the location had been for many years.

Continued cooperation was given the nursing service training program by lecturing to classes of aides in the psychiatric orientation course at both divisions of the hospital.

In October 1956 at the mid year Convention of the American College of Apothecaries in Dallas, Texas, Mrs. Myrtle E. Mackey, R. Ph., chief pharmacist, was elected a Hospital Fellow.

On February 14, 1957 Mrs. Mackey participated in a panel discussion at the pharmacy seminar at the University of South Carolina.

On April 4, 1957 she was elected first vice-president, Fifth District Pharmaceutical Society, and Herman W. Daniel, assistant pharmacist since June 2, 1956, was elected second vice-president for the ensuing year.

On June 8, 1957 he received his certificate of registration from the S. C. State Board of Pharmaceutical Examiners.

CHAPLAINCY SECTION

Chaplaincy service at both divisions continued the ministry of pastoral visitations and counseling to patients, with a grand total of 11,250 contacts. Such pastoral care included interviews with newly admitted patients; intensive follow-up counseling sessions; visits with the seriously ill; contacts on request and other visiting as indicated. There were 345 contacts with relatives of patients; and 743 visits to ill employees.

Worship services were conducted each Sunday and on special occasions in the Benet and the Fisher Auditoriums. Sunday services were also held in the Cooper, Saunders, Allan and Preston Buildings, Columbia Division; the Shand and Davis Buildings, State Park Division, with 263 sermons delivered during the year. There were 669 devotional services conducted on the wards for patients unable to participate in the Sunday worship. The response of the patients was good.

Appropriate services for Easter, Thanksgiving and Christmas were conducted in the chapels and on numerous wards. The patients again presented the annual Christmas pageant which was sponsored by the cooperative efforts of the music, occupational therapy and the chaplaincy sections.

Approximately 110 patients in six choirs and choruses, conducted by two part time music directors, provided music for worship and devotional services at both divisions.

An expanded program will be necessary to comply with the many requests from community clergy and theological students

to participate in the pastoral counseling program of the hospital. A pastoral counseling experience was arranged for a group of six community clergy who spent one day each week in the hospital for a period of ten weeks.

The usual clinical pastoral training program was not in progress during the past year as the supervisor for this work was on leave of absence.

Numerous opportunities were afforded for the chaplains to make contacts with churches and community groups. They delivered many talks, participated in discussion groups, and shared with community and State organizational groups in the promotion of mental health.

At each division of the hospital there was an advisory committee of community clergy representing various denominations which functioned in a most acceptable manner. Through these committees devotional booklets and materials, as well as other services, were provided.

Ministers of various faith groups from throughout the State frequently visited their parishioners.

The advisory committee for the State Park Division sponsored a program of Christmas remembrances and gifts for patients there, which was very successful. Deep appreciation is expressed to this committee and the churches represented for this service.

At the Columbia Division the Christmas gift program was a part of the church volunteer service, with the chaplains functioning as advisors to the volunteer service director in this phase of the work.

During the past year the Rev. J. Obert Kempson, chief chaplain, was granted a leave of absence on two occasions to study at Teachers College, Columbia University, New York, in the fields of group development and social psychology. The first leave was from July 5 through August 17, 1956. The second leave began September 25, 1956 and ended May 25, 1957.

While he was absent the activities of this section were directed by Chaplain William M. Major, with the Rev. Hawley Lynn, Methodist Board of Education, Columbia, assisting for three months; and the Rev. Alvin D. Bozard, pastor, Broad River Baptist Church, Columbia, for five months.

The continued increase in the hospital population necessarily indicates greater demands upon the chaplaincy section. Every effort was made to plan and utilize the resources of the chaplaincy section wisely and well to provide adequate pastoral care for the patients. In order to have a better ministry and to meet the requests for training the clergy in pastoral counseling two more full time chaplains are needed immediately.

PSYCHIATRIC SOCIAL SERVICE SECTION

Included in this report are the activities of both the Columbia and the State Park Divisions.

Histories: Social histories were secured on 818 patients referred by the medical staff for additional information to aid in diagnosis and treatment. This necessitated the social worker visiting the community and interviewing relatives, the family physician, former employers and others in order to secure a family and a personal history, as well as a detailed account of the onset of the illness.

Interim histories: There were 137 interim histories secured from relatives when patients were returned to the hospital for further treatment.

Special investigations: Histories were secured referable to 210 Court and penitentiary cases committed for observation.

Investigations prior to trial visit: Some patients sufficiently recovered to leave the hospital had home situations with which they were unable to cope. Others had no close relatives to assume responsibility for their care.

In the first group, efforts were made to explain the patient's attitude toward conditions he felt aggravated his condition prior to admission to the hospital. If relatives were interested and receptive, some of the difficulties were solved.

In the latter group, local social agencies and vocational rehabilitation personnel were helpful in arranging for the care of the patient.

Such aid was given 76 patients able to leave the hospital.

There are many other patients who could adjust outside the hospital if funds were allocated for their board in foster homes. This plan has worked successfully in other State hospitals and is worthwhile considering as a part of our program.

Follow-up visits: Contact was maintained with 42 patients on conditional discharge or trial visit. In some instances the worker played a supportive role, and helped by listening to the problems and giving assurance of the capabilities of the patient to carry on as a normal individual.

Others needing help were referred to available local clinics and agencies.

Work in the hospital: During the year there were 1901 interviews with patients in the hospital.

The purpose of the first interview shortly after admission was to explain the rules and policies of the hospital pertaining to the individual as a patient; such as having no visitors for the first ten days, and many other not understood policies. An interview of this sort relieved tension and apprehension experienced by numbers of patients in this new and strange environment. Every effort was made to impress upon the patient the availability of the social worker and the desire to be helpful in any way possible.

The response to this was gratifying, and the social worker was of service with many disturbing problems, such as concern over not hearing from relatives; the distress of a husband referable to the financial condition of his family; and that of a young mother as to the care of her children. Some desired information as to the possibility of getting social security. Others requested personal shopping for clothes. (The latter service could be handled by volunteers and efforts are being made to accomplish this through the volunteer section.)

Each request was handled by the worker to whom the case was referred, and a report was given to the patient.

There are patients who need help on an intensive case work basis if there is to be a satisfactory adjustment upon leaving the hospital.

As an illustration: A young woman amputee was referred by the physician for assistance in securing an artificial limb, for which funds were available. Months were spent with this project. There were trips for fittings, and instructions on learning to walk. Patience and understanding were required during the trying and discouraging time of adjustment to this situation. The patient was finally able to leave the hospital, and was re-

ferred to vocational rehabilitation personnel who are working on a proper job placement.

One worker was at the hospital every day, including week ends, to give information referable to the patients, as well as with reference to the hospital policies and the treatments available.

The work involves much more than answering routine questions. Many relatives are confused and disturbed about the illness of the patient, and need understanding and assurance referable to feelings they may have about having contributed to the mental breakdown. The opportunity to discuss the situation with an understanding, sympathetic listener in many instances alleviates anxieties and brings about a better attitude.

When the patient is ready to leave the hospital the worker is often able, with knowledge of the case and advice from the physician, to impart to relatives information helpful in making a satisfactory adjustment.

During the year there were 10,867 interviews with relatives, 3,435 local telephone calls and 682 long distance calls with reference to patients.

Educational activities: There was participation in the various training programs in the hospital, with talks to medical and theological students, as well as to aides in the psychiatric orientation course.

One worker was assigned to meet with the alcoholic group weekly with the purpose of giving some insight and understanding of their problem. A film was shown, followed by a discussion with patient participation.

Talks were made by the social worker at the State Park Division to groups in the psychiatric orientation course; and information about the hospital generally was conveyed to visiting groups from Allen University, Benedict College, and other colleges and schools.

INDUSTRIAL THERAPY

This phase of activities for patients involved many areas throughout the Columbia Division and the State Park Division.

Columbia Division:

The sewing room here continued to be an area of great activity and accomplishments with a daily average of 85 women occupied, and a grand total of 92,100 single articles completed during the year.

These included 594 items for surgery, 708 bedside table scarves, 24 white cassocks and 24 black robes for choir use, 124 single curtains or 62 pairs, 16,008 dish towels, 11,442 dresses, 16,524 pillow cases, 36,216 sheets, 10,164 slips and 272 table cloths.

In the fancy work room adjacent to this area, many baby saques and kimonas were made, in addition to embroidered towels, pillow cases, table cloths, scarves, vanity sets and dresser covers, as well as many crocheted bed spreads and table covers.

The generous gift from textile concerns of a great quantity of material in colorful patterns was made into dresses, shirts, blouses and aprons for the patients.

In the mending room an average of 14 women daily was engaged in repairing and restoring for use many items of wearing apparel and bed linen.

In various other activities in the dining halls, library, recreation and music therapy, etc. there was a daily average of 450 women.

A daily average of 550 men was engaged in the mattress making shop, the dining halls, greenhouse and campus, yard details, supply section, coal detail, library, recreation and music therapy, messenger service, pharmacy, etc.

State Park Division:

With the increased personnel making possible more individual attention and the almost universal usage of tranquilizing drugs, patients were more susceptible to opportunities in this field.

In the sewing room a daily average of 72 women patients made numerous garments as well as sheets and pillow cases for hospital use. Much mending was also done by this group.

There was a daily average of 358 women engaged in dining room work, in the laundry, on the wards and in various other activities. Every day 20 patients assisted in the library, as well as in the offices of the chaplain and the supervisors.

A group of approximately 20 to 30 women patients went to Pineland, A State Training School, adjacent to the State Park Division, daily to assist with the children. Many of these patients with children at home learned how to better care for them when improvement warrants their leaving the hospital.

With the supervision of the school faculty some patients having college training helped in the school program for the Pineland trainees.

In one building patients were organized to conduct daily religious ward services, and to teach the illiterate ones to read.

Realizing that improvement in personal appearance is one of the essentials in efforts toward recovery, each ward of the women's service was equipped with materials for this purpose, including the straightening and the curling of hair. Many were well enough to visit the sewing room to mend their clothing. In some areas irons and ironing boards were provided. Religious and recreation activities are motivations for good grooming and every encouragement was afforded.

The intensive flower garden program initiated to reach the older and regressed patients was well worthwhile, many heretofore not interested in any project taking an active part. Gifts from the Trinity Episcopal Church in Columbia of gardening equipment and a large picture to be used as a prize for the best flower garden were incentives for success, and were greatly appreciated.

A daily average of 807 men was actively interested in dining room work, in the kitchen and laundry, at the poultry farm and various gardens, in the yard and coal details, throughout the wards, chaplaincy service, recreation, messenger service, etc.

OCCUPATIONAL THERAPY

Columbia Division:

Since the transfer of the Columbia Division section to the larger area on the first floor of the Benet Auditorium in January 1956 there has been expansion of activities and accomplishments.

The accessibility of this section enabled many more visitors being conducted through the hospital to view work in the occupational therapy shop.

Among the accomplishments during the year were the removal of wiring from five thousand rejected electric blankets which made them usable by the hospital; the repair of three instruments for the music therapy section; and the repair of many articles of ward furniture.

Much improvement was shown in the watch and jewelry repair projects.

Patients in the Allan and Saunders Buildings continued interested in this activity with improvement in various skills.

During the year fourteen hundred throw rugs were completed; and every month from four to eight dozen bedroom slides and dozens of chair cushions were made.

Ceramics, woodwork and various types of needlecraft—rugs, embroidered center pieces, handbags, berets, etc.—were again popular with men and women.

The newest project was the display at Trinity Episcopal Church in Columbia of saleable doll beds, antique milking stools, reed trays, ceramics, etc.

The small garden for a group from this section provided diversion and the pleasure of supplying flowers frequently for church services, as well as for several wards and offices.

In the overall occupational therapy activities at the Columbia Division during the year 490 patients participated, with a daily average of 65.

State Park Division:

At the State Park Division occupational therapy was still limited although there was some expansion.

Considerable work was accomplished with crocheted and embroidered items, and in the making of costume jewelry, as well as quilts from scrap materials.

CHURCH BUILDING FUND

The well equipped Benet Auditorium, Columbia Division, and the Fisher Auditorium, State Park Division, with easy access, continued to enable many more patients to attend church services, and to permit expansion of religious activities. The small auditorium in the Williams Building served as a chapel for patients there.

These facilities meet a great need, but there still exists a necessity for an adequate structure devoted to religious activities at both the Columbia and the State Park Divisions.

The fund for the proposed building devoted to religious services at the Columbia Division was initiated by white patients in November 1943, with additional contributions since then from them, from relatives, friends and organizations, and the few gifts during the past year slightly increased the more than \$60,000.00 already available for that purpose. This amount was made possible by matching the \$30,000.00 appropriation of the General Assembly.

Plans are being formulated for intensive efforts to be made within the near future to secure funds required for adequate chapels at both divisions of the hospital.

LIBRARY SECTION

The activities of the Horger Library, Columbia Division, and those of the library located in the Fisher Auditorium at the State Park Division, continued on a multiple purpose level—diversional, educational and therapeutic.

However, in the past year a definite advance was made in services rendered to the patients. More individuals were contacted in the library and on the wards; more patients were referred by physicians, nursing and other personnel, and more group activity was sponsored.

Reading Service to Patients:

A total of 1,451 individuals borrowed material or used material in the reading rooms of both the Columbia and the State Park Division. Circulation totaled 27,737.

The library purchased 221 books, and 310 were added to the collections through contributions.

Periodicals were distributed regularly to 71 wards of the hospital. A total contribution of 62,120 periodicals made this service possible. The library purchased 37 periodical subscriptions, and 23 were contributed.

Regular visits were made to provide reading material on wards where the patients were unable to visit the library.

Patient Group Activity:

In addition to the Patients Library Club and the Library Committee, which were fairly well established, a Book Club and a Library Garden Group were sponsored.

The activities of these groups not only afforded the patients pleasure and an opportunity to identify with a group, but served as one means of remotivation and stimulation in acquiring new and broader interests.

The groups selected officers and planned the activities and programs. The use of audio-visual aids, occasional outside speakers, book reviews and discussions, and current events programs were among the group activities which served as a link with the world outside the hospital.

A patient group assisted in selecting and editing material for the library section of the hospital newspaper.

There was a total of 111 group meetings during the year. Even though the therapeutic value was well demonstrated in many individual patients, the limited professional staff of the library prevented further development of this phase of hospital library service.

Medical Library:

During the year 40 books were purchased, and 20 journals were received through subscription. Circulation totaled 754, and 191 individuals borrowed material.

Personnel:

A library assistant from the psychiatric aide group at the State Park Division was assigned on a part time basis to have charge of the reading room in the Fisher Auditorium.

A group of 8 patient volunteers at the Columbia Division rendered valuable service by performing such routine duties as typing, filing, sorting periodicals, keeping circulation records, shelving, processing and repairing books. One patient volunteer, a librarian, rendered professional assistance in cataloguing.

Two affiliate student nurses were assigned monthly to the library as a part of their psychiatric training program.

Talks were made to each group in the orientation course for psychiatric aides, and to students in the clinical pastoral training course.

Appreciation:

There is deep appreciation for the generosity and thoughtfulness of many individuals and groups who gave periodicals and books.

RECREATION THERAPY

Columbia Division

The recreation therapy section, Columbia Division, composed of a director and volunteer patient aides, assisted by affiliate student nurses assigned bimonthly, promoted a varied program of activities for the pleasure, relaxation and social rehabilitation of the patients.

Summary of Activities:

The social program provided 65 hospital-wide dances in the Benet Auditorium.

Play periods, numbering 60, composed of ballroom dancing, square and folk dancing, social games and group singing were promoted in the auditorium and on the wards; 11 card parties and 5 club parties were given. Remote wards were scheduled 21 times in rotation at the Benet Auditorium program of folk dancing, rhythmic, singing and exercises.

"Club 60", a club for oldsters to get together, enjoyed meeting 42 times.

Composed of patients rehearsed by the director, 3 variety shows were presented in the auditorium.

Halloween cabaret dance and floor show in the women's dining hall. The first part of the floor show was presented by patients, wearing formals; the second part by the Theodora Lee School of Ballet and Art, Columbia. Two cake walks completed the extra features. Refreshments were served.

Thanksgiving and Christmas dances were in the Benet Auditorium with music on both occasions contributed by an orchestra of the Columbia Federation of Musicians, Local 21, led by Professor Ben A. Gardner.

The dining hall and the auditorium were gaily decorated for these seasonal dances.

A seventh recreation birthday dance.

The Theodora Lee School of Ballet presented two elaborately costumed ballets.

A variety show by the Shaw Air Base personnel was enjoyed.

The Dixie Ramblers, Columbia, members of Local 21, played for a square dance.

Wards rotated in sending 20 men weekly to the Township Auditorium in the city for the professional wrestling matches. This was made possible by the generosity of Henry Marcus, wrestling promoter.

In the Benet and Williams Auditoriums, and on many wards with patient volunteer projectionists, 283 selected movies were shown.

There were 328 bingo games throughout the hospital, played competitively so those unable to participate in active games had an opportunity to feel the zest of competition.

Table games of cards, checkers, jigsaw puzzles, etc. were in constant operation in the dayrooms and "play spots" on the grounds. Pool continued to be enjoyed on 3 wards.

Television and radios provided pleasure and a means of keeping pace with outside affairs.

Outdoor sports included croquet, volley ball, horseshoes and goal back. Civic, commercial and church teams engaged the men patients in 26 softball games. They competed with hospital personnel 17 times, and played numerous games among themselves. The director supervised and scored all games played on the hospital field. Play was suspended until another site was graded on a new location. Groups of personnel, interns and ministerial students provided continuous opposition for the patient teams; and the affiliate student nurses added greatly to the interest of these late afternoon games.

In the Benet Auditorium 6 ping pong tournaments were promoted. Many employees and patients enjoyed games during the lunch hour and in the afternoon.

A daily program of selected music was broadcast to the wards, on the grounds, in dining halls and to assembled audiences in auditoriums.

Christmas decorations were ordered and distributed by the recreation section to the Columbia and State Park Divisions. After the holidays each ward supply was inventoried and returned for recreation storage.

Repairs for TV and radios were arranged with the business manager's office through the recreation office.

During the recent selection of the psychiatric aides of the year the publicity in "Palmetto Variety", the distribution and collection of ballot boxes were handled by the recreation therapy director.

By invitation, the director represented psychiatry and spoke on "Recreation in Psychiatry" at the third Southern Regional Institute on Hospital Recreation, University of North Carolina, Chapel Hill, N. C., April 28-31, 1957.

The hospital newspaper, "Palmetto Variety" continued to increase in size and value with contributions from patients and personnel of both divisions of the hospital. The recreation director edited the news, planned the layouts and prepared sketches for the newspaper. The masters were typed by a patient and sent to the hospital multilith office where 1050 copies each month were made. Patients helped to assemble, staple and distribute the newspapers throughout both divisions. Copies were sent to the hospital superintendents and recreation directors in many States, and to hospital volunteers and others interested.

There is still need for a station wagon for transportation of equipment and workers, a grandstand for the athletic field, a dugout, and an additional softball area, a swimming pool and several tennis courts.

This table gives some idea of the scope of recreation activities and the great number of patients involved:

<i>Activity</i>	<i>No. During Year</i>	<i>Attendance</i>
Dances	65	13,387—Including dances, Halloween, Thanksgiving and Christmas
Folk dances	27	1,060
Movies	283	20,800
Bingo	328	11,986
Varied recreation, cards, ward dancing, "Club 60" ..	39	6,177
Ballet, outside talent	2	750
Floor show	1	850—Halloween audience
Air Base show	1	225
Variety show—hospital talent	4	900
Recreation—rotated wards ..	19	104
Softball games with city teams	41	822—participants 2,665—spectators
Volleyball	240	880—participants 1,400—spectators
Total		62,006

Monthly average number of patients involved..... 5,167

Unable to estimate the number who participated in goal back, horseshoes,
cards, checkers, ping pong.

State Park Division

The recreation program at the State Park Division was diversified to permit maximum participation, and greater emphasis was placed on meeting the needs of the many patients at that division.

Each month during the past year wholesome and relaxing entertainment was provided in both the active and the passive groups. This wide range program included activities on the wards, in the Fisher Auditorium, on the athletic fields and special features.

Summary of Activities:

In addition to the 90 movies shown in the auditorium and throughout the hospital, there were 26 especially for those engaged in detail work and unable to attend the scheduled programs. The special movies were every Thursday afternoon at five o'clock in the Fisher Auditorium.

In the auditorium 52 dances were enjoyed, and 156 dances were conducted at various ward levels. To provide for those patients engaged in details 26 were arranged on Saturday. Refreshments were served at all of these affairs.

Throughout the wards and in the auditorium a total of 62 bingo parties were enjoyed.

There were 40 baseball games played on the athletic fields which provided leisure time pursuits for the patients.

Many patients combined their abilities to form several well organized softball teams. This intramural activity was well received and provided diversion during the late afternoon period. A group of all-stars from the various patient teams engaged the teams of aides and several teams from the Greater Columbia area with much success.

During "Open House" of National Mental Health Week the recreation section sponsored an exhibition depicting the various activities at the State Park Division.

At various times talks were given referable to the hospital facilities and information pertinent to patient care, etc. to visiting school and college groups and to psychiatric orientation classes.

Again the annual Halloween dance was featured by a dance contest with most of the patients in costume. Favors were given, and refreshments served.

Thanksgiving was celebrated with a well attended gala dance. There were special favors and refreshments.

There were many ward parties during Christmas, and due to the thoughtful generosity of individuals and church groups, each patient received at least one gift. Throughout the hospital were colorful, beautiful decorations, and the Fisher Auditorium was gaily decorated for the Christmas dance.

During the year two well attended talent shows were presented with variety acts by patients from the various buildings.

Games of cards, checkers, puzzles, etc. were provided for those not interested or able to participate in other activities.

A number of radios and several TV sets afforded diversion and pleasure. Several record players also provided enjoyment.

The following table conveys some idea of the recreation activities and the number of patients involved at the State Park Division:

<i>Activity</i>	<i>No. During Year</i>	<i>Attendance</i>
Dances—		
Auditorium	52	15,600
Wards	156	15,600
Special	26	4,800
		<hr/> 36,000
Bingo	62	15,500
Baseball games	40	20,000
Special attractions—July 4—Labor Day	2	1,600
Softball games	156	46,800
Movies —		
Auditorium	90	27,000
Special	26	5,200
		<hr/> 32,200
Talent shows	2	2,560
		<hr/>
Total		154,660
Monthly average number of patients contacted		12,888

This equipment would augment the existing program of recreation at the State Park Division:

A mobile cart for transporting equipment and supplies, two competent aides to assist recreation director, bleachers for athletic field, one well constructed equipment box at the athletic field, appropriate curtains on wards so films may be available for all patients, an increased number of phonograph records, sufficient playing cards for restricted areas, appropriate inclosure for athletic field.

VOLUNTEER SERVICE PROGRAM

The volunteer service program, initiated by the hospital superintendent, on November 1, 1954, emphasized during the year the importance and value of this connecting link between the patients, the hospital and the community.

The great worth of this project extended beyond the actual program service, and encompassed the extra hours devoted to the patients, the many gifts for their comfort and pleasure, and above all, the warmth of the friendship extended by the volunteers.

The volunteer service program served a dual purpose with many benefits—the contacts with the patients in the hospital which meant so much to them; and the knowledge and understanding

gained by the volunteers about the hospital and the mentally ill patients, which is conveyed by them as an educational factor to others in the community; the understanding of the fine line between illness and health; the numerous ways families and communities can help the mentally ill in the hospital, and in readjustment after discharge; and the many and diverse problems of the hospital administrators, physicians and other personnel.

Elsewhere are comments about the tribute to the many groups of splendid church volunteer workers from Greater Columbia and Lexington County.

During the past year there was a total of 372 parties on the wards, with an average of 300 volunteers visiting the hospital each month. In areas where visiting was not considered desirable, the volunteers participated in projects for the comfort and pleasure of the patients. Refreshments were provided for parties, and gifts to create more attractive surroundings. There were many personal remembrances for individuals.

Patients from 2 wards went to Sesquicentennial Park for a picnic; those from 10 wards had bus rides about the city and surrounding country, with refreshments on the way; 3 wards had supper at their "adopted" churches; one entire ward enjoyed a lawn party at the home of a volunteer; and following Mass at the hospital, coffee and donuts were served to the Catholic patients by the nurses of that faith.

Other entertainments provided by the volunteers included musicals, contests, special dances, bingo and various games.

Birthdays were remembered with cards and gifts, and often with a decorated cake for the patient friends to share.

During the holidays groups beautifully decorated the assigned areas and unusual parties were held, complete with Christmas refreshments and in several instances Santa Claus to distribute gifts.

Christmas carols were sung throughout the hospital campus by 5 groups; and a minister as Santa Claus visited 29 wards.

Volunteers, as well as other individuals (238) and organizations throughout the State were generous with gifts of all sorts for the happiness and comfort of the patients, and to make the wards more attractive and comfortable.

Among these contributions were: An individual Christmas gift for every patient at the Columbia and the State Park Division, 4 window fans, 3 ceiling fans, 1 water cooler, 6 TV sets and \$75.00 cash toward the purchase of a TV set, 2 pianos, 4 record players and many records, 1 violin, 1 mandolin, sheet music, song books, draperies, chairs, pictures, pillows, rugs, 2750 yards of material for dresses, slips and drapes, 19 gowns, 18 bathrobes, many small items of games, sewing material, etc., magazines and \$40.00 cash for magazine subscriptions, and garden tools for both divisions, and many, many cigarettes.

Plans are being formulated for a definite volunteer service program with a director for the State Park Division.

There is sincere gratitude to the organizations and individuals for the thoughtfulness and generosity which have meant so much to so many.

ADMINISTRATIVE DEPARTMENT

PERSONNEL DIVISION

The report of personnel on June 30, 1957 shows a total of only 34 positions vacant out of an authorized strength of 1486 full-time and part-time personnel. Of the 34 vacant positions, 12 required professional qualifications or specialized training; however, the remaining 22 vacancies could be immediately filled without difficulty. A sufficient number of applicants for most positions were available throughout the year and we were able to select personnel of higher caliber.

During the year 395 persons were employed, one employee transferred to Pineland and a total of 364 employees were separated. The annual rate of turnover based on an average of 1421 employees was 26 per cent. This represents a 3 per cent reduction in turnover since the last annual report.

A comparison of the annual rate of labor turnover for the five year period 1952-1957 (see Chart III) shows a decrease of 16 per cent. This reduction indicates a definite improvement in the personnel management program. During the fiscal year 1952-53 attendant and nursing personnel were placed on 8 hour shifts and a 44 hour work week. This change in policy which had not been authorized earlier due to limited funds contributed considerably to the 9 per cent reduction in the annual rate of turnover for the year 1953-54. Other factors such as gradual salary increases, orientation and training programs for aides and the procurement of higher quality personnel have helped in the development of a better personnel situation.

A total of 121 service emblems and certificates were awarded to employees of the Columbia and State Park Divisions as follows:

- 71 Five-year awards
- 34 Ten-year awards
- 4 Twenty-year awards
- 7 Thirty-year awards
- 5 Forty-year awards

PERSONNEL DIVISION—Continued

Chart 1

PERSONNEL EMPLOYED, TRANSFERRED AND SEPARATED
FISCAL YEAR 1956-57

MONTH	Number Employed	Number Transferred To Pineland	Number Separated
July	51	1	26
August	29	..	53
September	36	..	29
October	29	..	35
November	33	..	19
December	22	..	28
January	33	..	26
February	47	..	26
March	27	..	21
April	42	..	38
May	22	..	23
June	24	..	40
Total.....	395	1	364

Chart II

REASONS FOR SEPARATION FROM SERVICE DURING FISCAL YEAR 1956-57

	Number of Separations	Per Cent (Nearest One-tenth)
A. Resignation		
1. Better opportunity.....	44	12.1
2. Disliked working conditions.....	7	1.9
3. Home responsibilities.....	33	9.0
4. Hours too long or inconvenient.....	1	.3
5. Ill health.....	22	6.0
6. Insufficient salary.....	10	2.7
7. Job standards not met during trial period	6	1.6
8. Marriage	5	1.4
9. Military service.....	8	2.2
10. Moved from area of employment.....	34	9.3
11. Pregnancy	43	11.8
12. Returning to school.....	13	3.6
13. Transportation	2	.5
14. Other	31	8.5
B. Discharge		
1. Did not get along with fellow workers	—	—
2. Did not get along with Supervisor	1	.3
3. Dishonesty	1	.3
4. Failure to report for work.....	47	12.9
5. Forced resignation.....	4	1.1
6. Insubordination	5	1.4
7. Irregular attendance	5	1.4
8. Misconduct or violation of rules.....	7	1.9
9. Personality	—	—
10. References	—	—
11. Unsatisfactory work or incompetency.....	9	2.5
12. Other	10	2.7
C. Other		
1. Death	5	1.4
2. Disability retirement.....	—	—
3. Expiration of employment.....	2	.5
4. Ill health	1	.3
5. Job abolished	1	.3
6. Service retirement	7	1.9
7. Other	—	—
Total.....	364	99.8

Chart III

LABOR TURNOVER BASED ON SEPARATIONS

Five Year Period, 1952-1957

FISCAL YEAR	Average Number of Employees on Payroll	Number of Employees Separated	Annual Rate of Turnover
1952-1953	980	407	42%
1953-1954	1148	374	33%
1954-1955	1262	366	29%
1955-1956	1377	404	29%
1956-1957	1421	365	26%

REPORT OF PERSONNEL

June 30, 1957

FULL TIME PERSONNEL

DEPARTMENT	EMPLOYED					VACANCIES					Total Authorized Strength
	White Men	White Women	Negro Men	Negro Women	Total	White Men	White Women	Negro Men	Negro Women	Total	
ADMINISTRATION DEPARTMENT:											
Administrative Division.....	3	4	..	..	7	..	..	..	..	0	7
Finance Division.....	2	6	..	..	8	1	..	..	..	1	9
Personnel Division.....	3	4	..	..	7	..	..	..	..	0	7
Registrar Division.....	5	27	..	1	33	..	1	..	..	1	34
Total.....	13	41	..	1	55	1	1	..	..	2	57
MEDICAL DEPARTMENT:											
Professional Services.....	2	2	..	..	4	..	..	..	..	0	4
White Male Service.....	182	13	..	..	195	8	..	..	..	8	203
White Female Service.....	5	221	..	..	226	..	2	..	..	2	228
Colored Male Service.....	9	..	151	11	171	1	..	2	..	3	174
Colored Female Service.....	4	6	..	174	184	..	..	..	3	3	187
Nursing Education Service.....	..	2	..	..	2	..	1	..	..	1	3
Medical Auxiliary Service.....	23	24	8	7	62	5	2	..	1	8	70
Student Training Section.....	12	1	..	..	13	..	..	..	..	0	13
Total	237	269	159	192	857	14	5	2	4	25	882
GENERAL PLANT DEPARTMENT:											
Canteen Division.....	9	1	..	..	10	..	..	..	..	0	10
Dietary Division.....	29	17	84	88	218	..	..	..	1	1	219
Supply Division.....	9	..	5	..	14	..	..	..	..	0	14
Laundry Division.....	5	4	23	37	69	..	..	..	1	1	70
Milk Processing Division.....	2	..	6	..	8	..	..	..	..	0	8
Engineering Division.....	101	1	83	2	187	3	..	..	..	3	190
Farm Division.....	5	1	12	..	18	..	..	1	..	1	19
Total	160	24	213	127	524	3	..	1	2	6	530
TOTAL—Full Time Personnel...	410	334	372	320	1,436	18	6	3	6	33	1,469

PART TIME PERSONNEL

DEPARTMENT	EMPLOYED					VACANCIES					Total Authorized Strength
	White Men	White Women	Negro Men	Negro Women	Total	White Men	White Women	Negro Men	Negro Women	Total	
ADMINISTRATIVE DEPARTMENT:											
Personnel Division.....	..	1	..	..	1	..	..	..	..	0	1
Finance Division.....	1	2	..	..	3	..	..	..	..	0	3
Total	1	3	..	..	4	..	..	..	..	0	4
MEDICAL DEPARTMENT:											
Medical Staff—Part Time.....	10	..	..	..	10	..	..	..	..	0	10
Medical Auxiliary Service.....	..	1	..	1	2	..	..	1	..	1	3
Total	10	1	..	1	12	..	..	1	..	1	13
TOTAL—Part Time Personnel...	11	4	..	1	16	..	..	1	..	1	17
GRAND TOTAL—All Hospital Personnel	421	338	372	321	1,452	18	6	4	6	34	1,486

RETIRED

Fiscal Year 1956-57

MRS. MATTIE B. CARTER

Position: Seamstress

Department: Medical, Medical Auxiliary Service, Industrial
Therapy Section

Service Retirement: June 30, 1957

Length of Service: 30 years, 4 months, 10 days

MRS. ISABELLE HARRISON

Position: Senior Psychiatric Aide

Department: Medical, Colored Female Service

Service Retirement: June 30, 1957

Length of Service: 28 years, 10 months, 10 days

MRS. OLA INTZMINGER

Position: Flat Worker

Department: General Plant, Laundry Division (Columbia)

Service Retirement: February 2, 1957

Length of Service: 17 years, 3 months, 24 days

DR. WILBUR MERKLEY

Position: Psychiatrist

Department: Medical, White Male Service

Service Retirement: June 30, 1957

Length of Service: 5 years, 11 months, 30 days

MRS. JOSIE McDANIEL

Position: Maid

Department: Medical, Medical Auxiliary Service (Columbia)

Service Retirement: June 30, 1957

Length of Service: 13 years, 5 months, 7 days

MRS. MARGARET S. McDOWELL

Position: Ward Nurse, R.N.

Department: Medical, White Female Service

Service Retirement: June 30, 1957

Length of Service: 41 years, 7 months, 21 days

MISS KATE ROMANSTINE

Position: Canteen Clerk
 Department: General Plant, Canteen Division
 Service Retirement: December 31, 1956
 Length of Service: 36 years, 5 months, 6 days

DEATHS

Fiscal Year 1956-57

MRS. ELNORA BOUKNIGHT

Position: Senior Psychiatric Aide
 Department: Medical, Colored Female Service
 Date of Death: May 26, 1957
 Length of Service: 14 years, 29 days

MISS ANNIE R. FLOWERS

Position: Supervisor of Nursing Service
 Department: Medical, White Female Service
 Date of Death: October 14, 1956
 Length of Service: 32 years, 12 days

MISS BELL H. HENDERSON

Position: Senior Psychiatric Aide
 Department: Medical, Colored Female Service
 Date of Death: January 27, 1957
 Length of Service: 35 years, 3 months, 25 days

MR. GROVER PORTEE

Position: Senior Psychiatric Aide
 Department: Medical, Colored Male Service
 Date of Death: October 16, 1956
 Length of Service: 3 years, 10 months, 28 days

MR. HENRY B. WEED

Position: Psychiatric Aide
 Department: Medical, White Male Service
 Date of Death: December 24, 1956
 Length of Service: 8 years, 6 months, 18 days

ADMINISTRATIVE DEPARTMENT

FINANCE DIVISION

Year Ending June 30, 1957

Maintenance

The total operating revenue for the year was \$5,299,165.75, of which \$5,294,857.78 was expended and \$4,307.97 transferred to Pineland.

In addition to expenditures of \$5,294,857.78, the following supplies were furnished to the hospital, cost free:

U. S. Surplus Foods.....	\$186,301.74
Fresh Milk, 399,849.8 gallons.....	215,918.89

Based on a daily average population of 6220, the daily per capita cost was \$2.30. Excluding milk and surplus foods, the per diem amounted to \$2.27 (State appropriation).

During the year \$11,491.67 was remitted to the General Fund of the State of South Carolina, representing collections from employees for subsistence, etc. and sale of items purchased in prior years.

Permanent Improvements

All funds for permanent improvements were provided by State Appropriation.

The following projects were completed during 1956-57:

Construction, Improvements, etc.
Auditorium—Columbia Division

The Renovation of Existing Buildings is now in the process of completion. Construction of the Intensive Treatment Ward Building—Columbia Division, is now under way.

Funds are on hand, in the amount of \$2,614,454.06, for construction of the Intensive Treatment Ward Building.

FINANCIAL STATEMENT

Year Ending June 30, 1957

MAINTENANCE

Statement of Revenue and Expenditures

Source of Revenue:

State Appropriation.....	\$ 5,193,000.00
Employees Maintenance.....	103,430.78
Transportation of Patients.....	2,734.97
<hr/>	
Total Revenue.....	\$ 5,299,165.75
Less: Transfer to Pineland.....	4,307.97
<hr/>	
Operating Revenue.....	\$ 5,294,857.78

Expenditures:

Personal Services:

Salaries	\$ 2,793,448.60
Wages	624,036.61
Special Payments	6,493.20

Contractual Services:

Travel	7,627.39
Telephone and Telegraph.....	23,160.04
Repairs	89,305.65
Printing and Advertising.....	69.82
Water, Heat, Light and Power.....	89,343.64
Other Contractual Services.....	7,783.59

Supplies:

Food	713,219.23
Fuel	145,591.01
Feed and Veterinary Supplies.....	91,585.26
Office Supplies	16,030.69
Laundry Supplies.....	36,979.71
Medical Supplies.....	192,459.24
Educational Supplies.....	349.95
Motor Vehicle Supplies.....	14,906.34

Agricultural Supplies.....	6,412.43
Clothing and Dry Goods.....	160,154.69
Other Supplies.....	106,438.40
Poultry	16,842.00
Beef Cattle.....	275.00

Fixed Charges and Contributions:

Rent	376.60
Insurance	61,511.58
Other Fixed Charges.....	105.00

Equipment:

Office Equipment.....	4,870.91
Medical Equipment.....	5,482.64
Household Equipment.....	19,490.01
Motor Vehicles and Equipment.....	11,819.92
Agricultural Equipment.....	460.00
Other Equipment	13,228.63
Payment on Sprinkler System Note.....	35,000.00

Total Expenditures.....	\$ 5,294,857.78
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PERMANENT IMPROVEMENTS
Statement of Receipts and Disbursements
Year Ending June 30, 1957

Receipts:

State Appropriation.....	\$51,248.29
Total	\$ 51,248.29

Disbursements:

Construction, Improvements, Etc.....	\$ 4.09
Construction of Auditorium—Columbia.....	1,036.13
Construction of Ward Building—Columbia.....	2,628.44
Renovate Existing Buildings.....	47,579.63
Total	\$ 51,248.29

GENERAL PLANT DEPARTMENT

Canteen Division

Although seriously handicapped at this point by inadequate housing, both units of the canteen continue to render a creditable service to patients. A limited number of beverage, candy, and cigarette vending machines have been installed in strategic areas of the hospital helping to increase gross sales to \$125,502.72, which is an increase of \$12,022.56 over the previous year.

The need for enlarging the building at the Columbia Division and replacing the building at the State Park Division becomes more urgent as the volume of business and population of the hospital increases.

Dietary Division

The Food Service Center at Columbia continues to provide an improved service to patients, and at the close of the year meals served daily from this center were classified as follows:

7,275	Regular Diets
2,025	Soft Diets
384	Special Diets
970	Employees
102	Meals of Baby Food for Pineland

10,756 Total

One new cafeteria, in the renovated Talley Building, was put into operation.

It was not possible to improve conditions in the central kitchen and congregate dining rooms at State Park; and, therefore, this serious and alarming situation becomes more serious. The deterioration of the grossly inadequate equipment continues while the demands continue to rise at no less a pace causing sanitary conditions which *must* be described as potentially dangerous. At the end of the year meals served daily at State Park were classified as follows:

9,417	Regular Diets
557	Employees
600	Pineland
29	Pineland Employees

10,603 Total

Commodity Stabilization Service continued to supply the hospital with surplus foods although the quantities received this year were much less than those received in the previous year. Quantities received and values to the budget are as follows:

109,073 pounds	Butter	\$ 18,542.41
92,130 pounds	Cheese, process	38,233.95
448,300 pounds	Flour	24,208.20
48,000 dozen	Eggs, shell	21,600.00
73,500 pounds	Lard	14,700.00
31,900 pounds	Meal, corn	1,493.40
52,352 pounds	Cheese, natural	21,464.32
91,670 pounds	Milk, dry skim	16,500.60
119,500 pounds	Rice	16,789.25
30,018 pounds	Turkeys	11,857.11
730 lugs	Plums, fresh	912.50
		<hr/>
		\$186,301.74

Engineering Division

The program of repair and renovations of buildings continues and all funds in this project were encumbered, although not expended, by June 30, 1957. Buildings completed and the repairs involved are listed below:

Complete renovation of Talley Building including replastering, painting, new bathrooms, tile, and new cafeteria with equipment.

Parker Building Basement was renovated including paint, plaster patching, and new tile in food service area.

The old storeroom area on first floor of Administration Building was renovated and partitioned for use as office space.

Although the program of general maintenance was pressed to the utmost it does not seem likely that the hospital will be able to adopt a strictly preventive maintenance schedule in the near future because of the poor state of repair of the overall general plant. Much "catching up" needs to be done before such a program can exist.

Farm Division

Production of the farm was increased generally although the physical facilities are unimproved. Pork and poultry production should be increased considerably to meet the needs of the hospital, but adequate housing has not been provided in the absence of funds.

The following items were produced and made available for hospital use:

252,398 pounds	Dressed Pork
33,020 pounds	Dressed Beef
228,850 pounds	Dressed Poultry
54,090 dozen	Eggs
4,718	Watermelons
3,105	Cantaloupes
33,405 pounds	Sweet Potatoes
80,000 feet	Pine Lumber

Laundry Division

Because of increased demands for service on the already overloaded laundry a second shift was added in the Columbia plant and was set up to supply Pineland with laundry service as well as give some relief to the day shift. A survey was made in August 1956 before the second shift was added and at that time the combined plants were handling more than 12 tons of dry laundry each day. General conditions of the plant remain critical, and it is felt that the demand for more laundry service for the patients cannot be delayed indefinitely.

Milk Plant Division

The South Carolina Penitentiary farms delivered 436,250 gallons of raw milk to the hospital, including 36,400 gallons to be processed for the S. C. Penitentiary use. All of this milk was clarified, pasteurized, and homogenized. The use of dry skim milk and chocolate increased the total quantity of milk issued to the hospital to 422,223 gallons.

Supply Division

In addition to receiving, storing, issuing, and maintaining inventories on general supplies the hospital was responsible for the manufacturing and/or processing the following items:

Mattresses	2,476	Slips	20,748
Mattress Covers....	1,733	Aprons	8,334
Pillows	2,233	Night Shirts....	10,128
Pillow Cases.....	16,524	Table Cloths....	446
Dresses	21,756	Dish Towels....	17,088
Sheets	34,572	Gowns	2,616
Cracked Corn.....	113,615 pounds		
Ground Oats	173,550 pounds		
Grits	105,938 pounds		
Meal	38,517 pounds		
Meal (feed)	606,310 pounds		

ACKNOWLEDGEMENTS

The interest, sympathetic understanding, advice and encouragement of the South Carolina Mental Health Commission have been invaluable and sincerely appreciated.

There is gratitude for the cooperation of the General Assembly, the various State Departments and the county and municipal officers for the cooperation wholeheartedly given.

The factual statement of work accomplished in the different sections of the hospital does not adequately give credit to the hospital medical staff, nursing and aide corps, and other personnel for the earnest and untiring efforts to render the best possible service for the patients intrusted to our care; and to have an economic operation of the hospital. To each one sincere thanks are extended.

Again there is gratitude to the many friends, to the general public and to the many volunteer workers for the numerous kindnesses and material effects for the comfort and welfare of the patients.

Thanks are extended to the TV and radio stations, as well as to the press, for the generous coverage of feature stories and other news items to awaken and stimulate more interest in the mental health program, which is gaining more and more impetus throughout the State and the nation.

Yours very truly

WILLIAM S. HALL, M. D.
Superintendent

REPORT OF ARCHITECTS

July 1, 1957

Dr. William S. Hall, Superintendent
South Carolina State Hospital
Columbia, S. C.

Dear Doctor Hall:

We submit herewith our report for the fiscal year ending June 30, 1957 covering construction program under the South Carolina Mental Health Commission of work at the South Carolina State Hospital, both Columbia and State Park Divisions and Pineland, A State Training School.

Since the release of the resident engineer, the supervision of all work has been done directly by the architects.

Project No. 211—Office Building for S. C. Mental Health Commission.—This building has been completed and is now occupied by the Commission. Final acceptance was made in letter from the architect to Mr. G. A. Buchanan, Jr., Chairman, on May 13, 1957. The contractor's guarantee and bond carries on from one year after this date.

Project No. 210—Intensive Treatment Ward Building.—As indicated in the last report to the Commission, dated July 1, 1956, it was decided definitely to construct this building with available funds from the state, plus aid from the federal government through Hill-Burton, as administered by the U. S. Public Health Service. The total funds available for the project are as follows:

(a) Federal Share.....	\$ 400,907.00
(b) Applicant's Share (State Funds).....	1,938,968.04
	<hr/>
	\$2,339,875.04

Plans and specifications were prepared. Number of improvements, increases in equipment, etc., indicated that the funds available would be insufficient to properly construct the building. The architects made a report indicating that an additional sum of \$240,000.00 would be required to construct the work in accordance with the plans and specifications as completed. The Commission made a request to the Budget and Control Board for this sum, who in turn presented same to the General Assembly. Before adjournment the General Assembly approved this extra amount.

The plans and specifications were prepared with sufficient alternates to reduce the cost to the funds originally available as indicated above. Bids were received and considered on May 21, 1957. The bids were taken for general construction, elevators, sterilizing equipment, X-ray and dark room equipment, and food service equipment. Contracts were awarded by the Commission as follows:

Contract No. 1—General Construction:

Congaree Construction Co.—Contract Sum \$1,773,207.00 which was arrived at, as follows:

Base Bid	\$1,990,000.00
Alternates Accepted—	
1-A This omits tile wainscot in 1/2 of X-Ray Wing—Deduct	3,623.00
1-B Omits tile wainscot in all first floor spaces except toilets, central supply, cystoscopic, emergency operating and food service—Deduct	10,000.00
1-E Omits tile wainscot in 1st, 2nd, 3rd and 4th floor Corridors—Deduct	17,285.00
1-F Omits tile wainscot in 2nd, 3rd and 4th floor patient rooms—Deduct	24,873.00
2 Omit finish of 5th floor—Deduct	116,272.00
5-B Omit base and asphalt surface of drives and parking area—Deduct	35,740.00
8 Change rigid conduit to metallic tubing—Deduct	9,000.00
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	216,793.00
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Contract Sum	\$ 1,773,207.00

Contract No. 2—Elevator Contract:

Otis Elevator Company—Contract Sum \$60,780.00 which was arrived at, as follows:

Base Bid	\$ 92,266.00
Alternate No. 1—	
Omit one (1) elevator—Deduct	31,486.00
	<hr/>
Net Contract	\$ 60,780.00

EQUIPMENT CONTRACTS:

Contract No. 3—American Sterilizer Co.—Sterilizers and Accessories—

Net Contract	\$ 42,582.92
Arrived at, as follows:	
Base Bid	45,158.95
Omit sterilizers on 5th floor—Deduct	2,576.03
Net Contract	\$ 42,582.92

Contract No. 4—Westinghouse Electric Corporation—X-Ray and Dark Room Equipment—

Contract Sum	\$ 60,958.33
(This is the amount of base bid)	

Contract No. 5—O'Brien Hotel Supply Company—Food Service Equipment—

Contract Sum	20,005.69
(This is the amount of base bid)	

Total Net Awards	\$ 1,957,533.94
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Contracts were prepared and approved by the Budget and Control Board and the U. S. Public Health Service with the understanding that Change Orders would be issued, restoring omitted items, as follows:

Contract No. 1—Construction—Congaree Construction Co.—

Original Amount Contract	\$ 1,773,207.00
Restore Alt. No. 1-A—Add	\$ 3,623.00
Restore Alt. No. 1-B—Add	10,000.00
Restore Atl. No. 1E—Add	17,285.00
Restore Alt. No. 2—(Less 1-D)—	
Add	108,729.00
	139,637.00
	\$ 1,912,844.00

Contract No. 2—Elevators, Otis Elevator Co.—

Original Contract	\$ 60,780.00
Restore Alt. No. 1—Add	31,486.00
<hr/>	
Total Adjusted Contract Sum	\$ 92,266.00

Contract No. 3—Sterilizers—American Sterilizer Co.—

Original Contract	42,582.92
Restore 5th floor sterilizers—Add	2,576.03
<hr/>	
Total Adjusted Contract Sum	\$ 45,158.95

Summary of Awards to Date—

Contract No. 1—General Construction	\$ 1,912,844.00
Contract No. 2—Elevators	92,266.00
Contract No. 3—Sterilizers	45,158.95
Contract No. 4—X-Ray and Dark Room	60,958.33
Contract No. 5—Food Service Equipment	20,005.69
<hr/>	
Total	\$ 2,131,232.97

Sufficient funds are left in the project to take care of architect's and engineer's fees and contingencies.

Respectfully submitted

LAFAYE, FAIR, LAFAYE & ASSOCIATES
R. S. LAFAYE

LABORATORY OF TROPICAL DISEASES

Annual Report 1956-1957

Dr. William S. Hall
Superintendent
South Carolina State Hospital
Columbia, South Carolina

Dear Dr. Hall.

The annual report of the Laboratory of Tropical Diseases, National Institutes of Health, Public Health Service, in connection with the South Carolina State Hospital for the year ending June 30, 1957, is respectfully submitted.

During the past year, there has been increasing emphasis on the association of viruses with parasitic infections. Work has continued actively on the serious problem of parasitism in mental patients, especially on the methods of transmission and the search for better ways to treat and also to prevent the infections. The possibility of incorporating antimalarial drugs into common table salt was investigated at a prison as the result of a request of the World Health Organization. The major findings of the programs are shown below.

The laboratory continues to function as a national center to furnish strains of malaria for the treatment of other diseases.

Summary Research

Malaria Studies: It has been found that *Plasmodium malariae* (quartan malaria) can develop resistance to pyrimethamine (Daraprim), one of the newer antimalarial drugs when challenged by normal doses. This resistance became so marked, that four times the normal weekly dose had no effect on the malaria in some patients. Investigations are underway to determine if this can happen with other types of malaria such as *P. vivax* and *P. falciparum*.

In a cooperative study carried out at a Federal prison, it was found that antimalarial drugs, ie., chloroquine and pyrimethamine, incorporated into common table salt and used in food would prevent volunteers bitten by infected mosquitoes from developing malaria during the period the salt was consumed and for about one month after stopping the medication salt.

This indicates a way of controlling malaria in areas where the usual type of control by residual spraying of insecticides is not operative.

Development of New Drugs for Parasite Infections: Some worm infections, such as hookworm, *Trichuris* (whipworm), and *Strongyloides* are definite health problems in certain types of mental patients. There exist no satisfactory methods of treatment and this laboratory is searching for better drugs.

Both toluene and puromycin show some effect, usually better than the commonly used tetrachlorethylene, against hookworm and *Trichuris*. Further work is being done.

It was found that piperazine could be given safely in large (up to 7 grams) single doses. Preliminary results indicate good results against *Ascaris* (roundworm) and *Enterobius* (pin or seat worm) and some activity against the other worms.

Epidemiology of Intestinal Parasites: Observations were continued on the Saunders Building population for a third year to determine the fluctuation and spread of intestinal parasites under institutional conditions. The transmission of protozoan intestinal parasites continued within the group in spite of the high standards of sanitation and generally low degree of contamination observed in the building. The parasite incidence remained about the same, since parasite gain and loss were about equal. A study in the Allan Building of a small group of patients in whom protozoan parasites had been eradicated by treatment was conducted to note the approximate rate of reacquisition of parasites. It appears that patients in this institutional environment acquire one to two protozoan species over a period of a year, and that they may keep this up indefinitely. Frequent loss of parasite species, as well as other probable factors, prevent the patients from eventually possessing all species simultaneously.

During the fall of 1956 an epidemic of *Isospora belli*, a parasite which had been first detected a year earlier, occurred in the Pineland School at State Park. During this epidemic the infection was confirmed in 16 trainees and in 12 employees at the School; a number of others experienced symptoms but the parasite could not be confirmed by microscopic examinations. Further biological studies were done on this rare parasite and the population of the School is being watched for further outbreaks.

Studies in Virus-Parasite Association: This program was continued and expanded during the year, with some significant results. Using St. Louis encephalitis virus and the nematode *Nippostrongylus muris* in mice, it was found that passage of the worm parasite from a virus-infected host to a non-infected one simultaneously accomplished transmission of the virus. This provides a strong indication that the virus was actually incorporated within the parasite and that the parasite provided a vehicle for transport of the viral agent from host to host. Although this does not elucidate any known virus-parasite relationship, the demonstration that such an association can be produced artificially may indicate possible means of transmission of viral diseases where such transmission is at present unknown. Other experimental work has shown acquisition of virus by worm parasites during free-living stages, and other similar relationships.

Virus-Arthropod Investigations: Research was begun into the arthropod transmission of viruses. Experiments so far indicate that viruses may be acquired in the larval stages of mosquitoes and retained in the body when the insect has matured into an adult.

Methods have been developed for the rearing of *Hippelates* (eye gnat) which is commonly associated with conjunctivitis, especially in school children.

Parasite Cytology: From a standard laboratory strain of *Typanosoma gambiense*, causative organism of African sleeping sickness, a sub-strain about 24 times resistant to the supposedly anti-trypanocidal drug puromycin aminonucleoside was produced using sub-curative doses of the drug in infected white rats. Also a strain of *Plasmodium berghei* resistant to the antimalarial drug Daraprim has been produced in a similar manner in white mice. The purpose of producing these strains was two-fold: (1) for possible studies of the inheritance of drug resistance in parasitic protozoa, and (2) for a comparison of the effects of drug on the cytoplasm and nucleus of resistant and non-resistant strains of these parasites. In view of the almost universal opinion that all antimalarial drugs act by affecting the nucleus (or more specifically the bio-synthesis of nucleic acids) it is worth noting that Daraprim apparently has no effect on the nucleus of the malarial parasite.

Study on the cytology of malarial parasites has continued as patients with sufficient parasites have been available. The time in the life cycle of the malarial parasite at which meiosis (and therefore genetic segregation) takes place is on the third day after fertilization in the mosquito. Studies using improved techniques have shown that the so-called "diffuse" nucleus of the male gametocyte is actually composed of numerous nuclei, each composed of two unequal chromosomes ready to enter the sperm. The female gametocyte has only one nucleus, also composed of two unequal chromosomes. Both male and female gametocytes give a good positive Feulgen reaction for desoxyribonucleic acid, contrary to most reports in the literature.

Insectary Production: During the year 606,094 mosquitoes were reared for laboratory routine and experimental purposes.

Malaria Inocula Shipped: During the year 40 malaria inocula were shipped: 35 for neurosyphilis and 5 for nephrosis.

Visitors

Foreign visitors during the year included:

Dr. George A. Dissanaiké, University of Ceylon, Colombo, Ceylon. Dr. Dissanaiké was a visiting professor at the University of South Carolina.

Visitors on foreign assignments have visited the laboratory, including:

Mr. Arthur V. Regnier, Jr., Sr. Assistant Sanitarian (R) assigned as Entomology Advisor to the USA Operations Mission in Dacca, Pakistan.

Mr. Gerald D. Brooks, Assistant Sanitarian (R), Laboratory Entomologist with the USA Operations Mission in Baghdad, Iraq.

Miscellaneous

Dr. Martin D. Young was an invited participant at a conference at Oak Ridge, Tennessee, July 23 and 24, 1956, for the purpose of discussing the need for a controlled environmental facility for the southeastern states. He was the invited speaker at the July 26, 1956, and the June 27, 1957, meetings of the Journal Club of the South Carolina State Hospital.

Dr. Young and Dr. Wolcott participated in the Science Fair conferences held at the University of South Carolina September 27 to 29, 1956.

Dr. Gordon B. Wolcott was named President-elect of the South Carolina Academy of Science at their annual meeting in April 1957.

Dr. Martin D. Young accepted a three-month assignment as Consulting Malariologist to India under the auspices of the International Cooperation Administration, the work being done during the period January-April 1957. He was a member of a three-member panel to evaluate the malaria control program started in April of 1953 under an operational agreement between India and the United States. While in India, he was elected an Honorary Fellow of the National Society of India for Malaria and Other Mosquito-Borne Diseases. Under the rules of the Society, "The number of honorary fellows shall be limited to 50 and they will be persons mentioned for their knowledge of or contribution to the study and prevention of malaria and other mosquito-borne diseases and domiciled outside the territorial limits of India."

Meetings

Staff members attended the annual meetings of the American Society of Tropical Medicine and Hygiene, the Entomological Society of America, the Association of Southeastern Biologists, and the South Carolina Academy of Science, as officers and participants on the program.

Papers Published

Jeffery, G. M. Blood meal volume in *Anopheles quadrimaculatus*, *A. albimanus* and *Aedes aegypti*. Exp. Parasit. 5:371-375. July 1956.

Jeffery, G. M.; Young, M. D. and Eyles, D. E. The treatment of *Plasmodium falciparum* infection with Chloroquine, with a note on infectivity to mosquitoes of Primaquine- and Pyrimethamine treated cases. Am. J. Hyg. 64:1-11. July 1956.

Rendtorff, R. C. Treatment of a case of *Taenia saginata* infection with Diphenhydramine. J. Parasit. 42:382. August 1956.

- Jeffery, G. M. Human coccidiosis in South Carolina. *J. Parasit.* 42:491-495. October 1956.
- Jeffery, G. M. Intestinal parasites in a Georgia mental hospital. *J. Parasit.* 42:553-555. October 1956.
- Rendtorff, R. C. and Wilcox, Aimee. The role of nematodes as an entry for virus of Shope's fibromas and papillomas of rabbits. *J. Inf. Dis.* 100:119-123. March-April 1957.
- Young, M. D. The response of *Plasmodium malariae* infections to pyrimethamine (Daraprim). *Am. J. Trop. and Hyg.* 6:223-224. March 1957.

Personnel

In addition to the Director, the personnel of the Laboratory of Tropical Diseases, as of June 30, 1957, included:

Dr. Robert W. Burgess, Entomologist; Dr. Geoffrey M. Jeffery, Senior Scientist; Dr. Gordon B. Wolcott, Biologist (Cytology); Miss Aimee Wilcox, Protozoologist; Mr. Jimmie C. Skinner, Medical Technician (Parasitology); Mr. Andrew J. Harrison, Research Technician (Parasitology); Mrs. Jeanie H. Martin, Research Technician (Parasitology); Mr. Allen C. Brockman, Medical Biology Technician; Mr. Thomas S. Kearse, Medical Biology Technician; Mr. Leo E. Chester, Medical Biology Technician; Mr. Marion A. Region, Laboratory Worker; Mrs. Mary N. Schwinn, Secretary; Miss Ada P. Hall, Purchasing Agent; Miss Betty Anne Moore, Clerk-Stenographer; Mr. John Sharper, Jr., Laboratory Animal Caretaker.

Respectfully submitted

MARTIN D. YOUNG, Sc.D.
Scientist Director

ADMINISTRATIVE DEPARTMENT

REGISTRAR DIVISION

STATISTICAL DATA

TABLE 2—FIRST ADMISSIONS DURING THE YEAR BY AGE AT ADMISSION AND MENTAL DISORDER—
WHITE MALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	AGE (in years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	16	..	..	4	7	3	1	..	..	..	..
Drug or poison intoxication (except alcohol).....	8	..	..	2	3	2	1	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	24	..	..	6	10	5	2	..	..	..	1
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic Syphilis.....	1	..	..	..	1	..	..	..	..	..	..
Epidemic encephalitis.....	1	..	1	..	..	..	..	..	..	..	..
Birth trauma.....	1	..	..	..	..	1	..	..	..	..	..
Other trauma.....	3	..	1	..	1	1	..	..	..	..	..
Cerebral arteriosclerosis.....	157	..	1	1	..	7	18	69	44	17	..
Other circulatory disturbance.....	10	..	..	..	1	2	2	3	1	1	..
Convulsive disorder.....	4	..	..	1	1	..	2	..	..	..	..
Senile brain disease.....	4	..	..	..	..	..	..	1	2	1	..
Other disturbance of metabolism, growth, and nutrition	1	..	..	..	..	..	1	..	..	..	..
Intracranial neoplasm.....	3	..	1	..	..	1	..	..	1	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	185	..	4	2	4	12	23	73	48	19	..
PSYCHOTIC DISORDERS:											
Involuntional psychotic reaction.....	3	..	..	..	..	2	1	..	..	..	..
Manic-depressive reaction.....	24	..	2	1	2	9	6	2	..	1	1
Schizophrenic reactions.....	135	..	27	37	42	21	7	1	..	..	..
Paranoid reactions.....	5	..	..	..	..	1	3	1	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	167	..	29	38	44	33	17	4	..	1	1
PSYCHOPHYSIOLOGIC AUTONOMIC AND VISCERAL DISORDERS											
	2	..	1	..	1	..	..	..	..	..	..
PSYCHONEUROTIC REACTIONS											
	41	..	4	10	12	14	1	..	..	..	..
PERSONALITY DISORDERS:											
Personality pattern disturbance.....	4	..	3	..	..	1	..	..	..	..	..
Personality trait disturbance.....	8	1	4	2	..	1	..	..	..	..	..
Antisocial reaction.....	5	..	4	1	..	..	..	..	..	..	..
Sexual deviation.....	1	..	..	..	1	..	..	..	..	..	..
Alcoholism (addiction).....	109	..	1	18	46	36	7	..	..	..	1
Drug addiction.....	2	..	1	..	..	1	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	129	1	13	21	47	39	7	..	..	..	1
TRANSIENT SITUATIONAL PERSONALITY DISTURBANCE											
	1	..	..	..	1	..	..	..	..	..	..
MENTAL DEFICIENCY.....											
WITHOUT MENTAL DISORDER.....	21	1	4	5	8	3	..	..	..	..	..
	79	3	19	15	22	10	4	..	..	..	6
GRAND TOTAL.....	649	5	74	97	149	116	54	77	48	20	9

TABLE 2—FIRST ADMISSIONS DURING THE YEAR BY AGE AT ADMISSION AND MENTAL DISORDER—
WHITE FEMALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	AGE (in years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	6	..	1	1	1	2	1	..	..	..	..
Drug or poison intoxication (except alcohol).....	7	..	..	2	2	1	..	1	1	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	13	..	1	3	3	3	1	1	1	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	1	..	..	..	1	..	..	..	..	..	..
Cerebral arteriosclerosis.....	92	..	..	..	..	4	32	36	19	..	1
Other circulatory disturbance.....	5	..	..	..	1	1	2	1	..	..	..
Convulsive disorder.....	10	..	3	3	3	..	1	..	..	..	..
Senile brain disease.....	33	..	..	..	..	..	..	7	18	8	..
Other disturbance of metabolism, growth, and nutrition	1	..	1	..	..	..	..	..	..	..	..
Diseases of unknown and uncertain cause.....	2	..	..	1	..	..	..	1	..	..	..
Chronic brain syndrome of unknown cause.....	1	..	..	..	..	1	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	145	..	4	4	5	6	35	45	37	8	1
PSYCHOTIC DISORDERS:											
Involuntary psychotic reaction.....	1	..	..	..	..	1	..	..	..	..	..
Manic-depressive reaction.....	8	..	..	1	2	4	..	1	..	..	..
Schizophrenic reactions.....	139	..	24	36	46	28	5	..	..	..	..
Paranoid reactions.....	3	..	..	..	1	2	..	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	151	..	24	37	49	35	5	1	..	..	..
PSYCHONEUROTIC REACTIONS.....	108	..	9	24	30	27	16	2	..	..	..
PERSONALITY DISORDERS:											
Personality trait disturbance.....	15	..	3	4	6	2	..	..	..	..	..
Dyssocial reaction.....	3	..	1	1	1	..	..	..	..	..	..
Sexual deviation.....	1	..	1	..	..	..	..	..	..	..	..
Alcoholism (addiction).....	16	..	..	7	5	2	2	..	..	..	..
Drug addiction.....	4	..	..	2	2	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	39	..	5	14	14	4	2	..	..	..	..
TRANSIENT SITUATIONAL PERSONALITY DISTURBANCE	1	..	1	..	..	..	..	..	..	..	..
MENTAL DEFICIENCY.....	13	..	1	3	5	4	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	18	2	3	6	5	2	..	..	..	..	..
GRAND TOTAL.....	488	2	48	91	111	81	59	49	38	8	1

TABLE 2—FIRST ADMISSIONS DURING THE YEAR BY AGE AT ADMISSION AND MENTAL DISORDER—
COLORED MALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	AGE (in years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	47	..	4	19	17	4	3	..	..	..	..
All other conditions.....	3	..	..	..	2	1	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	50	..	4	19	19	5	3	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic syphilis.....	15	..	..	1	3	7	3	1	..	..	..
Other intracranial infections.....	1	..	..	1	..	..	..	..	..	..	..
Alcohol intoxication.....	13	..	..	2	5	6	..	..	..	..	..
Birth trauma.....	1	..	1	..	..	..	..	..	..	..	..
Other trauma.....	3	..	..	..	3	..	..	..	..	..	..
Cerebral arteriosclerosis.....	84	..	..	..	..	17	24	24	15	3	1
Other circulatory disturbance.....	2	..	..	..	..	1	1	..	..	..	..
Convulsive disorder.....	5	..	4	1	..	..	..	..	..	..	..
Senile brain disease.....	2	..	..	..	..	..	..	..	2	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	126	..	5	5	11	31	28	25	17	3	1
PSYCHOTIC DISORDERS:											
Manic-depressive reaction.....	4	..	1	1	..	1	..	..	..	..	1
Schizophrenic reactions.....	100	..	38	30	17	13	1	1	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	104	..	39	31	17	14	1	1	..	..	1
PSYCHONEUROTIC REACTIONS.....	2	..	..	1	..	1	..	..	..	..	..
PERSONALITY DISORDERS:											
Personality pattern disturbance.....	1	..	..	1	..	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	1	..	..	1	..	..	..	..	..	..	..
MENTAL DEFICIENCY.....	13	2	5	2	4	..	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	31	3	13	5	6	3	1	..	..	..	..
GRAND TOTAL.....	327	5	66	64	57	54	33	26	17	3	2

TABLE 2—FIRST ADMISSIONS DURING THE YEAR BY AGE AT ADMISSION AND MENTAL DISORDER—
COLORED FEMALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	AGE (in years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	5	..	..	4	1	..	..	..	..	..	..
All other conditions.....	1	..	..	..	1	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	6	..	..	4	2	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic syphilis.....	2	..	..	1	..	..	..	1	..	..	..
Alcohol intoxication.....	2	..	..	..	2	..	..	..	..	..	..
Other trauma.....	3	..	1	1	..	1	..	..	..	..	..
Cerebral arteriosclerosis.....	38	..	..	..	..	11	13	9	5	..	..
Other circulatory disturbance.....	4	..	..	1	..	3	..	..	..	..	..
Convulsive disorder.....	12	..	2	5	3	2	..	..	..	..	..
Senile brain disease.....	40	..	..	..	..	1	2	17	15	5	..
Diseases of unknown and uncertain cause.....	1	..	..	..	1	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	102	..	3	8	6	18	15	27	20	5	..
PSYCHOTIC DISORDERS:											
Manic-depressive reaction.....	28	..	3	11	11	3	..	..	..	..	..
Schizophrenic reactions.....	118	..	16	50	34	13	2	..	..	..	3
TOTAL PSYCHOTIC DISORDERS.....	146	..	19	61	45	16	2	..	..	..	3
PSYCHONEUROTIC REACTIONS.....	4	..	2	..	1	..	1	..	..	..	..
PERSONALITY DISORDERS:											
Personality pattern disturbance.....	1	..	1	..	..	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	1	..	1	..	..	..	..	..	..	..	..
MENTAL DEFICIENCY.....	9	..	3	3	2	1	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	15	1	8	2	2	1	..	1	..	..	..
GRAND TOTAL.....	283	1	36	78	58	36	18	28	20	5	3

TABLE 2—READMISSIONS DURING THE YEAR BY AGE AT ADMISSION AND MENTAL DISORDER—
WHITE MALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	AGE (in years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	6	..	..	..	2	4	..	..	..	..	..
Drug or poison intoxication (except alcohol).....	1	..	..	..	1	..	..	..	..	..	..
All other conditions.....	1	..	..	..	..	1	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	8	..	..	..	3	5	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic syphilis.....	2	..	..	..	1	1	..	..	..	..	..
Epidemic encephalitis.....	1	..	..	..	..	1	..	..	..	..	..
Alcohol intoxication.....	1	..	..	..	..	1	..	..	..	..	..
Cerebral arteriosclerosis.....	17	..	..	..	..	3	7	4	2	..	1
Other circulatory disturbance.....	3	..	..	..	..	3	..	..	..	..	..
Convulsive disorder.....	9	..	1	2	2	3	1	..	..	..	..
Senile brain disease.....	2	..	..	..	..	..	1	..	..	1	..
Diseases of unknown and uncertain cause.....	1	..	..	..	1	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	36	..	1	2	4	11	9	5	2	1	1
PSYCHOTIC DISORDERS:											
Involuntary psychotic reaction.....	3	..	..	..	..	2	..	1	..	..	..
Manic-depressive reaction.....	17	..	..	..	3	8	3	2	1	..	..
Schizophrenic reactions.....	78	..	6	21	25	17	6	1	..	..	1
Paranoid reactions.....	1	..	..	..	..	..	..	1	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	99	..	6	21	29	25	11	3	3	..	1
PSYCHONEUROTIC REACTIONS.....	15	..	..	4	3	4	2	2	..	..	..
PERSONALITY DISORDERS:											
Personality trait disturbance.....	1	..	..	..	..	1	..	..	..	..	..
Antisocial reaction.....	2	..	..	..	2	..	..	..	..	..	..
Sexual deviation.....	3	..	..	2	1	..	..	..	..	..	..
Alcoholism (addiction).....	45	..	..	8	14	22	..	1	..	..	..
TOTAL PERSONALITY DISORDERS.....	51	..	..	10	17	23	..	1	..	..	..
TRANSIENT SITUATIONAL PERSONALITY DISTURBANCE	1	..	..	..	..	1	..	..	..	..	..
MENTAL DEFICIENCY.....	4	..	..	1	1	1	1	..	..	..	..
WITHOUT MENTAL DISORDER.....	9	..	1	2	2	2	1	..	..	..	1
GRAND TOTAL.....	223	..	8	40	59	72	24	11	5	1	3

TABLE 2—READMISSIONS DURING THE YEAR BY AGE AT ADMISSION AND MENTAL DISORDER—
WHITE FEMALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	AGE (in years)								
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:										
Drug or poison intoxication (except alcohol).....	1	..	..	..	..	..	1	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	1	..	..	..	..	..	1	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:										
Epidemic encephalitis.....	1	..	1	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	31	..	..	..	..	1	13	12	5	..
Other circulatory disturbance.....	2	..	..	..	1	..	1	..	..	..
Convulsive disorder.....	12	..	2	1	5	4	..	..	..	..
Diseases of unknown and uncertain cause.....	1	..	..	..	1	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	47	..	3	1	7	5	14	12	5	..
PSYCHOTIC DISORDERS:										
Manic-depressive reaction.....	15	..	..	1	3	7	4	..	..	..
Schizophrenic reactions.....	93	..	7	22	29	25	10	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	108	..	7	23	32	32	14	..	..	..
PSYCHONEUROTIC REACTIONS.....	33	..	..	5	10	14	3	1	..	..
PERSONALITY DISORDERS:										
Personality pattern disturbance.....	1	..	..	1	..	..	..	..	..	..
Personality trait disturbance.....	6	..	1	2	1	1	..	..	..	1
Alcoholism (addiction).....	8	..	..	1	4	2	..	1	..	..
Drug addiction.....	4	..	..	2	2	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	19	..	1	6	7	3	..	1	..	1
TRANSIENT SITUATIONAL PERSONALITY DISTURBANCE	1	..	..	..	1	..	..	..	..	..
MENTAL DEFICIENCY.....	8	..	..	2	4	1	1	..	..	..
WITHOUT MENTAL DISORDER.....	4	..	2	..	1	..	1	..	..	..
GRAND TOTAL.....	221	..	13	37	62	55	34	14	5	1

TABLE 2—READMISSIONS DURING THE YEAR BY AGE AT ADMISSION AND MENTAL DISORDER—
COLORED MALE

Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	AGE (in years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	4	..	..	1	3	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	4	..	..	1	3	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	4	..	..	1	2	..	1	..	..	..	..
Cerebral arteriosclerosis.....	12	..	..	..	..	3	2	6	1	..	..
Convulsive disorder.....	6	..	1	..	1	3	1	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	22	..	1	1	3	6	4	6	1	..	..
PSYCHOTIC DISORDERS:											
Manic-depressive reaction.....	8	..	1	1	1	3	1	1	..	..	..
Schizophrenic reactions.....	36	..	10	11	10	5	..	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	44	..	11	12	11	8	1	1	..	..	..
PERSONALITY DISORDERS:											
Alcoholism (addiction).....	1	..	1	..	..	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	1	..	1	..	..	..	..	..	..	..	..
MENTAL DEFICIENCY.....	3	..	..	..	1	2	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	8	..	1	2	3	1	1	..	..	..	..
GRAND TOTAL.....	82	..	14	16	21	17	6	7	1	..	..

TABLE 2—READMISSIONS DURING THE YEAR BY AGE AT ADMISSION AND MENTAL DISORDER—
COLORED FEMALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	AGE (in years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	1	..	..	1	..	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	1	..	..	1	..	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic syphilis.....	2	..	..	..	..	1	..	1	..	..	..
Cerebral arteriosclerosis.....	7	..	..	..	..	2	2	1	2	..	..
Other circulatory disturbance.....	1	..	..	..	..	1	..	..	..	..	..
Convulsive disorder.....	5	..	1	4	..	..	..	..	..	..	..
Senile brain disease.....	3	..	..	..	..	..	..	2	..	1	..
TOTAL CHRONIC BRAIN SYNDROMES.....	18	..	1	4	..	4	2	4	2	1	..
PSYCHOTIC DISORDERS:											
Manic-depressive reaction.....	27	..	..	6	8	7	4	2	..	..	..
Schizophrenic reactions.....	24	..	2	10	7	4	1	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	51	..	2	16	15	11	5	2	..	..	..
PSYCHONEUROTIC REACTIONS.....	1	..	..	..	..	..	1	..	..	..	..
MENTAL DEFICIENCY.....	6	..	1	2	1	1	1	..	..	..	..
GRAND TOTAL.....	77	..	4	23	16	16	9	6	2	1	..

TABLE 3—ALL DISCHARGES—FIRST ADMISSIONS BY AGE AT DISCHARGE AND MENTAL DISORDER—WHITE MALE

Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	AGE (in years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	16	..	..	3	8	3	2	..	..	..	..
Drug or poison intoxication (except alcohol).....	6	..	..	3	2	..	1	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	22	..	..	6	10	3	3	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic syphilis.....	7	..	1	..	4	1	..	1	..	..	..
Other CNS syphilis.....	1	..	..	..	..	1	..	..	..	..	..
Alcohol intoxication.....	1	..	..	..	..	..	1	..	..	..	..
Other trauma.....	4	..	..	2	2	..	..	..	..	..	..
Cerebral arteriosclerosis.....	68	..	..	..	2	4	16	27	16	3	..
Other circulatory disturbance.....	6	..	..	..	2	2	1	1	..	..	..
Convulsive disorder.....	11	..	1	6	2	2	..	..	..	..	..
Senile Brain disease.....	2	..	..	..	..	..	..	1	..	1	..
Intracranial neoplasm.....	1	..	..	..	1	..	..	..	..	..	..
Diseases of unknown and uncertain cause.....	1	..	..	..	1	..	..	..	..	..	..
Chronic brain syndrome of unknown cause.....	1	..	..	..	..	1	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	103	..	2	8	14	11	18	30	16	4	..
PSYCHOTIC DISORDERS:											
Involutional psychotic reaction.....	7	..	..	..	..	3	2	1	1	..	..
Manic-depressive reaction.....	18	..	..	1	3	6	5	3	..	..	..
Psychotic depressive reaction.....	3	..	..	..	..	1	2	..	..	..	..
Schizophrenic reactions.....	117	..	22	36	33	20	6	..	..	..	..
Paranoid reactions.....	1	..	..	..	..	..	..	1	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	146	..	22	37	36	30	15	5	1	..	..
PSYCHONEUROTIC REACTIONS.....	25	..	2	7	7	5	3	1	..	..	..
PERSONALITY DISORDERS:											
Personality pattern disturbance.....	3	..	2	..	..	1	..	..	..	..	..
Personality trait disturbance.....	10	2	3	3	..	2	..	..	..	..	..
Antisocial reaction.....	6	..	4	1	..	1	..	..	..	..	..
Sexual deviation.....	3	..	..	1	1	1	..	..	..	..	..
Alcoholism (addiction).....	103	..	2	18	43	34	6	..	..	..	..
Drug addiction.....	1	..	..	1	..	..	..	..	..	..	..
Special symptom reaction.....	1	..	..	..	1	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	127	2	11	24	45	39	6	..	..	..	..
TRANSIENT SITUATIONAL PERSONALITY DISTURBANCE	2	..	..	..	2	..	..	..	..	..	..
MENTAL DEFICIENCY.....	12	1	3	5	2	1	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	76	4	18	17	22	12	3	..	..	..	..
GRAND TOTAL.....	513	7	58	104	138	101	48	36	17	4	..

TABLE 3—DISCHARGES—FIRST ADMISSIONS BY AGE AT DISCHARGE AND MENTAL DISORDER—WHITE FEMALE

Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	AGE (in years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	8	..	1	1	2	3	1	..	..	..	..
Drug or poison intoxication (except alcohol).....	6	..	..	2	1	1	..	2	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	14	..	1	3	3	4	1	2	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic syphilis.....	2	..	..	..	1	..	1	..	..	..	..
Other CNS syphilis.....	1	..	..	..	1	..	..	..	..	..	..
Other trauma.....	1	..	1	..	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	40	..	..	..	..	1	12	17	10	..	..
Other circulatory disturbance.....	9	..	..	..	3	2	2	2	..	..	..
Convulsive disorder.....	6	..	3	2	1	..	..	..	..	..	..
Senile brain disease.....	4	..	..	..	..	..	..	3	1	..	..
Other disturbance of metabolism, growth, and nutrition	1	..	..	..	1	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	64	..	4	2	7	3	15	19	13	1	..
PSYCHOTIC DISORDERS:											
Involutional psychotic reaction.....	14	..	..	..	2	9	3	..	..	..	..
Manic-depressive reaction.....	6	..	..	..	1	4	1	..	..	..	..
Schizophrenic reactions.....	145	1	17	49	43	26	9	..	..	..	..
Paranoid reactions.....	3	..	..	..	..	1	2	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	168	1	17	49	46	40	15	..	..	..	..
PSYCHONEUROTIC REACTIONS.....	85	..	6	20	21	27	8	3	..	..	..
PERSONALITY DISORDERS:											
Personality trait disturbance.....	14	..	4	3	5	2	..	..	..	..	..
Dyssocial reaction.....	3	..	1	2	..	..	..	..	..	..	..
Sexual deviation.....	1	1	..	..	..	..	..	..	..	..	..
Alcoholism (addiction).....	19	..	..	8	7	2	2	..	..	..	..
Drug addiction.....	4	..	..	2	1	1	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	41	1	5	15	13	5	2	..	..	..	..
TRANSIENT SITUATIONAL PERSONALITY DISTURBANCE	1	..	1	..	..	..	..	..	..	..	..
MENTAL DEFICIENCY.....	14	1	1	4	5	3	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	19	2	4	6	5	2	..	..	..	..	..
GRAND TOTAL.....	406	5	39	99	100	84	41	24	13	1	..

TABLE 3—ALL DISCHARGES—FIRST ADMISSIONS BY AGE AT DISCHARGE AND MENTAL DISORDER—COLORED MALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	AGE (in years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	46	..	5	15	21	3	2	..	..	..	..
Drug or poison intoxication (except alcohol).....	1	..	..	1	..	..	..	..	..	..	..
All other conditions.....	5	..	2	1	2	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	52	..	7	17	23	3	2	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic syphilis.....	5	..	..	1	2	1	..	..	1	..	..
Other intracranial infections.....	1	..	..	1	..	..	..	..	..	..	..
Alcohol intoxication.....	22	..	4	5	9	3	..	1	..	..	..
Other trauma.....	1	..	..	1	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	19	..	..	..	1	4	4	9	1	..	..
Convulsive disorder.....	6	..	1	4	1	..	..	..	..	..	..
Senile brain disease.....	1	..	..	..	..	..	..	..	..	1	..
TOTAL CHRONIC BRAIN SYNDROMES.....	55	..	5	12	13	8	4	10	2	1	..
PSYCHOTIC DISORDERS:											
Manic-depressive reaction.....	6	..	1	1	2	1	1	..	..	..	..
Schizophrenic reactions.....	63	1	18	25	12	5	2	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	69	1	19	26	14	6	3	..	..	..	..
PSYCHONEUROTIC REACTIONS.....	1	..	..	1	..	..	..	..	..	..	..
PERSONALITY DISORDERS:											
Antisocial reaction.....	1	..	..	1	..	..	..	..	..	..	..
Alcoholism (addiction).....	1	..	..	1	..	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	2	..	..	2	..	..	..	..	..	..	..
MENTAL DEFICIENCY.....	6	..	4	1	1	..	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	33	2	13	3	10	4	1	..	..	..	..
GRAND TOTAL.....	218	3	48	62	61	21	10	10	2	1	..

TABLE 3—ALL DISCHARGES—FIRST ADMISSIONS BY AGE AT DISCHARGE AND MENTAL DISORDER—COLORED FEMALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	AGE (in years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	6	..	..	4	2	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	6	..	..	4	2	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic syphilis.....	3	..	..	..	3	..	..	..	..	..	..
Alcohol intoxication.....	1	..	..	1	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	27	..	..	..	..	12	5	10	..	..	..
Convulsive disorder.....	6	..	3	..	..	3	..	..	..	..	..
Senile brain disease.....	7	..	..	..	..	1	..	3	2	1	..
TOTAL CHRONIC BRAIN SYNDROMES.....	44	..	3	1	3	16	5	13	2	1	..
PSYCHOTIC DISORDERS:											
Manic-depressive reaction.....	36	..	2	9	14	8	2	1	..	..	..
Schizophrenic reactions.....	83	..	18	37	21	5	2	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	119	..	20	46	35	13	4	1	..	..	..
PSYCHONEUROTIC REACTIONS.....	5	..	1	2	1	1	..	..	..	..	..
PERSONALITY DISORDERS:											
Personality pattern disturbance.....	1	..	1	..	..	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	1	..	1	..	..	..	..	..	..	..	..
MENTAL DEFICIENCY.....	18	..	7	9	1	1	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	15	1	8	3	2	..	..	1	..	..	..
GRAND TOTAL.....	208	1	40	65	44	31	9	15	2	1	..

TABLE 3—ALL DISCHARGES—READMISSIONS BY AGE AT DISCHARGE AND MENTAL DISORDERS—WHITE MALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	AGE (in years)								
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:										
Alcohol intoxication.....	7	..	..	..	2	5	..	..	..	..
Drug or poison intoxication (except alcohol).....	2	..	..	..	2	..	..	..	..	..
All other conditions.....	1	..	..	..	..	1	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	10	..	..	..	4	6	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:										
Alcohol intoxication.....	2	..	..	1	..	..	1	..	..	..
Other trauma.....	2	..	..	1	..	..	1	..	..	..
Cerebral arteriosclerosis.....	2	..	..	..	1	..	2	3	2	..
Convulsive disorder.....	8	..	..	2	3	2	1	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	20	..	..	4	4	2	5	3	2	..
PSYCHOTIC DISORDERS:										
Manic-depressive reaction.....	27	..	..	2	6	7	7	4	1	..
Schizophrenic reactions.....	52	..	2	17	18	12	2	..	1	..
Paranoid reactions.....	1	..	..	..	..	..	1	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	80	..	2	19	24	19	10	4	2	..
PSYCHONEUROTIC REACTIONS.....	10	..	2	1	3	2	1	1	..	..
PERSONALITY DISORDERS:										
Personality trait disturbance.....	1	..	..	..	..	1	..	..	..	..
Antisocial reaction.....	2	..	..	..	2	..	..	..	..	..
Sexual deviation.....	3	..	..	2	1	..	..	..	..	..
Alcoholism (addiction).....	47	..	..	8	15	21	3	..	..	..
TOTAL PERSONALITY DISORDERS.....	53	..	..	10	18	22	3	..	..	..
TRANSIENT SITUATIONAL PERSONALITY DISTURBANCE	1	..	..	..	..	1	..	..	..	..
MENTAL DEFICIENCY.....	3	..	..	1	..	2	..	..	..	..
WITHOUT MENTAL DISORDER.....	12	..	2	3	3	2	2	..	..	..
GRAND TOTAL.....	189	..	6	38	56	56	21	8	4	..

TABLE 3—ALL DISCHARGES—READMISSIONS BY AGE AT DISCHARGE AND MENTAL DISORDERS—WHITE FEMALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	AGE (in years)								
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:										
Drug or poison intoxication (except alcohol).....	2	..	..	..	..	1	1	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	2	..	..	..	..	1	1	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:										
Other CNS syphilis.....	1	..	..	..	..	..	1	..	..	..
Alcohol intoxication.....	1	..	..	..	..	1	..	..	..	..
Cerebral arteriosclerosis.....	16	..	..	..	..	..	4	9	1	2
Other circulatory disturbance.....	2	..	..	..	..	..	2	..	..	..
Convulsive disorder.....	9	..	1	3	1	2	2	..	..	..
Diseases of unknown and uncertain cause.....	2	..	..	..	1	1	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	31	..	1	3	2	4	9	9	1	2
PSYCHOTIC DISORDERS:										
Manic-depressive reaction.....	13	..	..	..	..	6	6	1	..	..
Schizophrenic reactions.....	71	..	3	10	32	19	6	1	..	..
TOTAL PSYCHOTIC DISORDERS.....	84	..	3	10	32	25	12	2	..	..
PSYCHONEUROTIC REACTION.....	22	..	..	6	6	5	5	..	..	..
PERSONALITY DISORDERS:										
Personality pattern disturbance.....	1	..	..	..	1	..	..	..	..	..
Personality trait disturbance.....	6	..	1	2	2	1	..	..	..	..
Alcoholism (addiction).....	9	..	..	1	5	2	1	..	..	..
Drug addiction.....	4	..	..	2	2	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	20	..	1	5	10	3	1	..	..	..
TRANSIENT SITUATIONAL PERSONALITY DISTURBANCE	1	..	..	..	1	..	..	..	..	..
MENTAL DEFICIENCY.....	8	..	..	2	5	1	..	..	..	..
WITHOUT MENTAL DISORDER.....	2	..	2	..	..	..	..	..	..	..
GRAND TOTAL.....	170	..	7	26	56	39	28	11	1	2

TABLE 3—ALL DISCHARGES—READMISSIONS BY AGE AT DISCHARGE AND MENTAL DISORDER—COLORED MALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	AGE (in years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	4	..	1	..	3	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	4	..	1	..	3	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	7	..	..	..	4	3	..	..	..	..	..
Cerebral arteriosclerosis.....	6	..	..	..	..	1	4	..	1	..	..
Convulsive disorder.....	2	..	..	1	1	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	15	..	..	1	5	4	4	..	1	..	..
PSYCHOTIC DISORDERS:											
Manic-depressive reaction.....	6	..	..	1	3	..	2	..	..	..	..
Schizophrenic reactions.....	20	..	5	5	9	1	..	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	26	..	5	6	12	1	2	..	..	..	..
PERSONALITY DISORDERS:											
Alcoholism (addiction).....	1	..	..	..	1	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	1	..	..	..	1	..	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	7	..	1	2	2	1	1	..	..	..	..
GRAND TOTAL.....	53	..	7	9	23	6	7	..	1	..	..

TABLE 3—ALL DISCHARGES—READMISSIONS BY AGE AT DISCHARGE AND MENTAL DISORDER—COLORED FEMALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	AGE (in years)								
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:										
Alcohol intoxication.....	1	..	..	1	..	..	..	..	..	..
Drug or poison intoxication (except alcohol).....	1	..	..	..	1	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	2	..	..	1	1	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:										
Meningoencephalitic syphilis.....	1	..	..	..	..	1	..	..	..	..
Cerebral arteriosclerosis.....	2	..	..	..	..	..	1	1	..	..
Convulsive disorder.....	1	..	..	..	1	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	4	..	..	..	1	1	1	1	..	..
PSYCHOTIC DISORDERS:										
Involutional psychotic reaction.....	1	..	..	..	..	1	..	..	..	..
Manic-depressive reaction.....	25	..	..	7	8	6	4	..	..	..
Schizophrenic reactions.....	23	..	2	9	9	2	1	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	49	..	2	16	17	9	5	..	..	..
MENTAL DEFICIENCY.....	6	..	1	2	3	..	..	..	..	..
GRAND TOTAL.....	61	..	3	19	22	10	6	1	..	..

TABLE 4—ALL DISCHARGES—FIRST ADMISSIONS BY NET LENGTH OF TIME IN HOSPITAL AND MENTAL DISORDER—WHITE MALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	NET LENGTH OF TIME IN HOSPITAL											
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years 30 years and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:													
Alcohol intoxication.....	16	15	..	1	..	..	..	..	..	..	..	..	..
Drug or poison intoxication (except alcohol).....	6	6	..	..	..	..	..	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	22	21	..	1	..	..	..	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:													
Meningoencephalitic syphilis.....	7	1	1	1	3	..	..	..	1	..	..	..	..
Other CNS syphilis.....	1	..	1	..	..	..	..	..	..	..	..	..	..
Alcohol intoxication.....	1	1	..	..	..	..	..	..	..	..	..	..	..
Other trauma.....	4	2	..	..	1	1	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	68	45	9	7	5	1	1	..	..	..	..	..	..
Other circulatory disturbance.....	6	6	..	..	..	..	..	..	..	..	..	..	..
Conclusive disorder.....	11	4	1	4	..	1	1	..	..	..	..	..	..
Senile brain disease.....	2	2	..	..	..	..	..	..	..	..	..	..	..
Intracranial neoplasm.....	1	..	1	..	..	..	..	..	..	..	..	..	..
Diseases of unknown and uncertain cause.....	1	1	..	..	..	..	..	..	..	..	..	..	..
Chronic brain syndromes of unknown cause.....	1	1	..	..	..	..	..	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	103	63	13	12	9	3	2	..	1	..	..	..	..
PSYCHOTIC DISORDERS:													
Involuntional psychotic reaction.....	7	3	3	..	..	..	..	..	..	..	..	1	..
Manic-depressive reaction.....	18	12	4	..	1	..	..	..	1	..	..	..	..
Psychotic depressive reaction.....	3	2	1	..	..	..	..	..	..	..	..	..	..
Schizophrenic reactions.....	117	50	33	16	5	1	6	3	1	1	1	..	..
Paranoid reactions.....	1	..	..	..	..	..	1	..	..	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	146	67	41	16	6	1	7	3	2	1	1	1	..
PSYCHONEUROTIC REACTIONS.....	25	21	4	..	..	..	..	..	..	..	..	..	..

PERSONALITY DISORDERS:												
Personality pattern Disturbance.....	3	3	..	..	..	..	..	..	..	..	..	..
Personality trait disturbance.....	10	8	2	..	..	..	..	..	..	..	..	..
Antisocial reaction.....	6	5	1	..	..	..	..	..	..	..	..	..
Sexual deviation.....	3	3	..	..	..	..	..	..	..	..	..	..
Alcoholism (addiction).....	103	100	3	..	..	..	..	..	..	..	..	..
Drug addiction.....	1	1	..	..	..	..	..	..	..	..	..	..
Special symptom reaction.....	1	..	1	..	..	..	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	127	120	5	2	..	..	..	..	..	..	..	..
TRANSIENT SITUATIONAL PERSONALITY DISTURBANCE.....	2	1	1	..	..	..	..	..	..	..	..	..
MENTAL DEFICIENCY.....	12	8	2	..	1	..	1	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	76	75	1	..	..	..	..	..	..	..	..	..
GRAND TOTAL.....	513	376	67	31	16	4	10	3	3	1	1	1

TABLE 4—ALL DISCHARGES—FIRST ADMISSIONS BY NET LENGTH OF TIME IN HOSPITAL AND MENTAL DISORDER—WHITE FEMALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	NET LENGTH OF TIME IN HOSPITAL												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:														
Alcohol intoxication.....	8	8	..	..	..	..	..	..	..	..	..	..	..	..
Drug or poison intoxication (except alcohol).....	6	6	..	..	..	..	..	..	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	14	14	..	..	..	..	..	..	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	2	..	..	1	..	..	..	..	1	..	..	..	..	..
Other CNS syphilis.....	1	..	1	..	..	..	..	..	..	..	..	..	..	..
Other trauma.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	40	23	8	4	5	..	..	..	1	..	..	..	..	..
Other circulatory disturbance.....	9	8	..	1	..	..	..	..	..	..	..	..	..	..
Convulsive disorder.....	6	6	..	..	..	..	..	..	..	..	..	..	..	..
Senile brain disease.....	4	3	..	1	..	..	..	..	..	..	..	..	..	..
Other disturbance of metabolism, growth, and nutrition.....	1	..	1	..	..	..	..	..	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	64	40	10	7	5	..	..	..	2	..	..	..	..	..
PSYCHOTIC DISORDERS:														
Involuntary psychotic reaction.....	14	10	2	..	..	1	..	..	1	..	..	..	..	..
Manic-depressive reaction.....	6	4	1	..	..	..	..	1	..	..	..	..	..	..
Schizophrenic reactions.....	145	82	33	14	4	2	..	3	4	3	..	..	..	..
Paranoid reactions.....	3	2	1	..	..	..	..	..	..	..	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	168	98	37	14	4	3	..	4	5	3	..	..	..	..
PSYCHONEUROTIC REACTIONS.....	85	71	12	..	1	..	..	1	..	..	..	..	..	..
PERSONALITY DISORDERS:														
Personality trait disturbance.....	14	14	..	..	..	..	..	..	..	..	..	..	..	..
Dyssocial reaction.....	3	3	..	..	..	..	..	..	..	..	..	..	..	..

Sexual deviation.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..
Alcoholism (addiction).....	19	19	..	..	..	..	..	..	..	..	..	..	..	..	..
Drug addiction.....	4	3	..	..	1	..	..	..	..	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	41	40	..	..	1	..	..	..	..	..	..	..	..	..	..
TRANSIENT SITUATIONAL PERSONALITY DISTURBANCE.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..
MENTAL DEFICIENCY.....	14	11	2	..	..	..	..	..	..	1	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	19	19	..	..	..	..	..	..	..	..	..	..	..	..	..
GRAND TOTAL.....	406	294	61	21	11	3	..	5	7	4	..	..	..	..	..

TABLE 4—ALL DISCHARGES—FIRST ADMISSIONS BY NET LENGTH OF TIME IN HOSPITAL AND MENTAL DISORDER—COLORED MALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	NET LENGTH OF TIME IN HOSPITAL												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:														
Alcohol intoxication.....	46	43	3	..	..	..	..	..	..	..	..	..	..	..
Drug or poison intoxication (except alcohol).....	1	..	1	1	..	..	..	..	..	..	..	..	..	..
All other conditions.....	5	3	1	1	..	..	..	..	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	52	46	4	2	..	..	..	..	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	5	..	1	4	..	..	..	..	..	..	..	..	..	..
Other intracranial infections.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
Alcohol intoxication.....	22	15	2	3	2	..	..	..	..	..	..	..	..	..
Other trauma.....	1	..	1	1	..	..	..	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	19	8	4	5	2	..	..	..	..	..	..	..	..	..
Convulsive disorder.....	6	1	1	1	1	..	1	..	1	..	..	..	..	..
Senile brain disease.....	1	..	1	..	..	..	..	..	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	55	25	9	14	5	..	1	..	1	..	..	..	..	..
PSYCHOTIC DISORDERS:														
Manic-depressive reaction.....	6	3	1	1	1	..	..	..	..	..	..	..	..	..
Schizophrenic reactions.....	63	8	17	17	11	4	1	2	2	..	..	..	..	1
TOTAL PSYCHOTIC DISORDERS.....	69	11	18	18	12	4	1	2	2	..	..	..	..	1
PSYCHONEUROTIC REACTIONS.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
PERSONALITY DISORDERS:														
Antisocial reaction.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
Alcoholism (addiction).....	1	..	1	..	..	..	..	..	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	2	1	1	..	..	..	..	..	..	..	..	..	..	..
MENTAL DEFICIENCY.....	6	4	1	..	..	1	..	..	..	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	33	29	2	1	..	..	1	..	..	..	..	..	..	..
GRAND TOTAL.....	218	117	35	35	17	5	3	2	3	..	..	..	..	1

TABLE 4—ALL DISCHARGES—FIRST ADMISSIONS BY NET LENGTH OF TIME IN HOSPITAL AND MENTAL DISORDER—COLORED FEMALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	NET LENGTH OF TIME IN HOSPITAL													
	Total	Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:														
Alcohol intoxication.....	6	6	..	..	..	..	..	..	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	6	6	..	..	..	..	..	..	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	3	1	1	..	..	..	..	..	1	..	..	..	..	..
Alcohol intoxication.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	27	7	12	3	1	2	1	..	1	..	..	..	..	..
Convulsive disorder.....	6	1	3	1	..	..	..	..	..	1	..	..	..	..
Senile Brain disease.....	7	4	1	1	..	..	..	..	1	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	44	14	17	5	1	2	1	..	3	1	..	..	..	..
PSYCHOTIC DISORDERS:														
Manic-depressive reaction.....	36	21	6	2	4	1	..	..	2	..	..	..	..	..
Schizophrenic reactions.....	83	12	17	29	10	5	2	2	5	..	1	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	119	33	23	31	14	6	2	2	7	..	1	..	..	..
PSYCHONEUROTIC REACTIONS.....	5	3	2	..	..	..	..	..	..	..	..	..	..	..
PERSONALITY DISORDERS:														
Personality pattern disturbance.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
MENTAL DEFICIENCY.....	18	3	3	1	..	3	2	1	4	..	1	..	..	..
WITHOUT MENTAL DISORDER.....	15	14	1	..	..	..	..	..	..	..	..	..	..	..
GRAND TOTAL.....	208	74	46	37	15	11	5	3	14	1	2	..	..	..

TABLE 4—ALL DISCHARGES—READMISSIONS BY NET LENGTH OF TIME IN HOSPITAL AND MENTAL DISORDER—WHITE MALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	NET LENGTH OF TIME IN HOSPITAL												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:														
Alcohol intoxication.....	7	6	..	..	..	1	..	..	..	..	..	..	..	..
Drug or poison intoxication (except alcohol).....	2	1	..	1	..	..	..	..	..	..	..	..	..	..
All other conditions.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	10	8	..	1	..	1	..	..	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Alcohol intoxication.....	2	..	1	..	..	1	..	..	..	..	..	..	..	..
Other trauma.....	2	..	1	..	..	..	..	..	1	..	..	..	..	..
Cerebral arteriosclerosis.....	8	6	..	1	..	..	..	..	1	..	..	..	..	..
Convulsive disorder.....	8	2	1	4	..	..	..	..	1	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	20	8	3	5	..	1	..	..	3	..	..	..	..	..
PSYCHOTIC DISORDERS:														
Manic-depressive reaction.....	27	13	3	6	4	..	..	..	..	..	..	..	..	1
Schizophrenic reactions.....	52	22	15	9	5	1	..	..	..	..	..	..	..	..
Paranoid reactions.....	1	..	1	..	..	..	..	..	..	..	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	80	35	19	15	9	1	..	..	..	..	..	..	..	1
PSYCHONEUROTIC REACTIONS.....	10	6	2	1	1	..	..	..	..	..	..	..	..	..
PERSONALITY DISORDERS:														
Personality trait disturbance.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
Antisocial reaction.....	2	2	..	..	..	..	..	..	..	..	..	..	..	..
Sexual deviation.....	3	3	..	..	..	..	..	..	..	..	..	..	..	..
Alcoholism (addiction).....	47	47	..	..	..	..	..	..	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	53	53	..	..	..	..	..	..	..	..	..	..	..	..
TRANSIENT SITUATIONAL PERSONALITY DISTURBANCE.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
MENTAL DEFICIENCY.....	3	1	1	..	..	..	1	..	..	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	12	12	..	..	..	..	..	..	..	..	..	..	..	..
GRAND TOTAL.....	189	124	25	22	10	3	1	..	3	..	..	..	..	1

TABLE 4—ALL DISCHARGES—READMISSIONS BY NET LENGTH OF TIME IN HOSPITAL AND MENTAL DISORDER—WHITE FEMALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	NET LENGTH OF TIME IN HOSPITAL													
	Total	Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:														
Drug or poison intoxication (except alcohol).....	2	1	..	1	..	..	..	..	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	2	1	..	1	..	..	..	..	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Other CNS syphilis.....	1	..	1	..	..	..	..	..	..	..	..	..	..	..
Alcohol intoxication.....	1	..	1	..	..	..	..	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	16	8	3	3	2	..	..	..	..	..	..	..	..	..
Other circulatory disturbance.....	2	1	..	1	..	..	..	..	..	..	..	..	..	..
Convulsive disorder.....	9	2	3	2	..	..	1	..	..	..	1	..	..	..
Diseases of unknown and uncertain cause.....	2	..	2	..	..	..	..	..	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	31	11	10	6	2	..	1	..	..	..	1	..	..	..
PSYCHOTIC DISORDERS:														
Manic-depressive reaction.....	13	6	1	1	2	1	1	..	1	..	..	..	..	..
Schizophrenic reactions.....	71	26	16	13	12	1	1	..	1	1	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	84	32	17	14	14	2	2	..	2	1	..	..	..	..
PSYCHONEUROTIC REACTIONS.....	22	16	2	2	..	1	..	..	1	..	..	..	..	..
PERSONALITY DISORDERS:														
Personality pattern disturbance.....	1	..	1	..	..	..	..	..	..	..	..	..	..	..
Personality trait disturbance.....	6	6	..	..	..	..	..	..	..	..	..	..	..	..
Alcoholism (addiction).....	9	8	1	..	..	..	..	..	..	..	..	..	..	..
Drug addiction.....	4	4	..	..	..	..	..	..	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	20	18	2	..	..	..	..	..	..	..	..	..	..	..
TRANSIENT SITUATIONAL PERSONALITY DISTURBANCE.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
MENTAL DEFICIENCY.....	8	6	1	1	..	..	..	..	..	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	2	2	..	..	..	..	..	..	..	..	..	..	..	..
GRAND TOTAL.....	170	87	32	24	16	3	3	..	3	1	1	..	..	..

TABLE 4—ALL DISCHARGES—READMISSIONS BY NET LENGTH OF TIME IN HOSPITAL AND MENTAL DISORDER—COLORED MALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	NET LENGTH OF TIME IN HOSPITAL												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:														
Alcohol intoxication.....	4	4	..	..	..	..	..	..	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	4	4	..	..	..	..	..	..	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH														
Alcohol intoxication.....	7	3	2	1	1	..	..	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	6	2	1	1	1	..	1	..	..	..	..	..	..	..
Convulsive disorder.....	2	2	..	..	..	..	..	..	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	15	7	3	2	2	..	1	..	..	..	..	..	..	..
PSYCHOTIC DISORDERS:														
Manic-depressive reaction.....	6	3	1	2	..	..	..	..	..	..	..	..	..	..
Schizophrenic reactions.....	20	3	4	2	6	2	3	..	..	..	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	26	6	5	4	6	2	3	..	..	..	..	..	..	..
PERSONALITY DISORDERS:														
Alcohol (addiction).....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	7	6	1	..	..	..	..	..	..	..	..	..	..	..
GRAND TOTAL.....	53	24	9	6	8	2	4	..	..	..	..	..	..	..

TABLE 4—ALL DISCHARGES—READMISSIONS BY NET LENGTH OF TIME IN HOSPITAL AND MENTAL DISORDER—COLORED FEMALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	NET LENGTH OF TIME IN HOSPITAL												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:														
Alcohol intoxication.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
Drug or poison intoxication (except alcohol).....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	2	2	..	..	..	..	..	..	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH														
Meningoencephalitic syphilis.....	1	..	..	..	..	..	..	1	..	..	..	..	..	..
Cerebral arteriosclerosis.....	2	1	1	..	..	..	..	..	..	..	..	..	..	..
Convulsive disorder.....	1	..	1	..	..	..	..	..	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	4	1	2	..	..	..	..	1	..	..	..	..	..	..
PERSONALITY DISORDERS:														
Involuntary psychotic reaction.....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
Manic-depressive reaction.....	25	11	8	4	1	..	..	1	..	..	..	..	..	..
Schizophrenic reactions.....	23	5	6	2	2	2	1	..	2	2	1	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	49	16	14	7	3	2	1	1	2	2	1	..	..	..
MENTAL DEFICIENCY.....	6	..	2	1	2	1	..	..	..	..	..	..	..	..
GRAND TOTAL.....	61	19	18	8	5	3	1	2	2	2	1	..	..	..

TABLE 5—ALL DISCHARGES BY CONDITION ON DISCHARGE AND MENTAL DISORDER—
WHITE MALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Condition on Discharge					
	Total	Recovered	Improved	Unimproved	Unchanged	Unclassified
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:						
Alcohol intoxication.....	23	5	2	1	..	15
Drug or poison intoxication (except alcohol).....	8	2	1	..	..	5
All other conditions.....	1	..	..	..	..	1
TOTAL ACUTE BRAIN SYNDROMES.....	32	7	3	1	..	21
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:						
Meningoencephalitic syphilis.....	7	..	2	..	..	5
Other CNS syphilis.....	1	..	1	..	..	..
Alcohol intoxication.....	3	..	3	..	..	..
Other trauma.....	6	..	5	..	..	1
Cerebral arteriosclerosis.....	76	..	59	6	..	11
Other circulatory disturbance.....	6	..	5	..	..	1
Convulsive disorder.....	19	..	12	..	..	7
Senile brain disease.....	2	..	2	..	..	..
Intracranial neoplasm.....	1	..	1	..	..	..
Diseases of unknown and uncertain cause.....	1	..	1	..	..	..
Chronic brain syndrome of unknown cause.....	1	..	1	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	123	..	92	6	..	25
PSYCHOTIC DISORDERS:						
Involutional psychotic reaction.....	7	..	5	1	..	1
Manic-depressive reaction.....	45	..	41	..	..	4
Psychotic depressive reaction.....	3	..	3	..	..	..
Schizophrenic reactions.....	169	..	130	..	..	39
Paranoid reactions.....	2	..	2	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	226	..	181	1	..	44
PSYCHONEUROTIC REACTIONS.....	35	27	..	..	..	8
PERSONALITY DISORDERS:						
Personality pattern disturbance.....	3	..	..	1	2	..
Personality trait disturbance.....	11	..	..	..	11	..
Antisocial reaction.....	8	..	..	..	8	..
Sexual deviation.....	6	..	..	..	6	..
Alcoholism (addiction).....	150	..	..	..	150	..
Drug addiction.....	1	..	..	..	1	..
Special symptom reaction.....	1	..	..	..	1	..
TOTAL PERSONALITY DISORDERS.....	180	..	..	1	179	..
TRANSIENT SITUATIONAL PERSONALITY DISTURBANCE.....	3	1	..	..	2	..
MENTAL DEFICIENCY.....	15	..	4	1	10	..
WITHOUT MENTAL DISORDER.....	88	..	..	..	88	..
GRAND TOTAL.....	702	35	280	10	279	98

TABLE 5—ALL DISCHARGES BY CONDITION ON DISCHARGE AND MENTAL DISORDER—
WHITE FEMALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Condition on Discharge					
	Total	Recovered	Improved	Unimproved	Unchanged	Unclassified
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:						
Alcohol intoxication.....	8	3	..	..	..	5
Drug or poison intoxication (except alcohol).....	8	3	1	..	..	5
TOTAL ACUTE BRAIN SYNDROMES.....	16	5	1	..	..	10
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:						
Meningoencephalitic syphilis.....	2	..	2	..	..	..
Other CNS syphilis.....	2	..	2	..	..	..
Alcohol intoxication.....	1	..	1	..	..	..
Other trauma.....	1	..	..	..	..	1
Cerebral arteriosclerosis.....	56	..	49	2	..	5
Other circulatory disturbance.....	11	..	11	..	..	..
Convulsive disorder.....	15	..	11	..	..	4
Senile brain disease.....	4	..	4	..	..	..
Other disturbance of metabolism, growth, and nutrition.....	1	..	1	..	..	..
Diseases of unknown and uncertain cause.....	2	..	1	..	..	1
TOTAL CHRONIC BRAIN SYNDROMES.....	95	..	82	2	..	11
PSYCHOTIC DISORDERS:						
Involuntary psychotic reaction.....	14	..	13	1	..	..
Manic-depressive reaction.....	19	..	18	1	..	..
Schizophrenic reactions.....	216	..	207	1	..	8
Paranoid reactions.....	3	..	3	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	252	..	241	3	..	8
PSYCHONEUROTIC REACTIONS.....	107	1	94	1	..	11
PERSONALITY DISORDERS:						
Personality pattern disturbance.....	1	..	..	..	1	..
Personality trait disturbance.....	20	..	..	..	20	..
Dyssocial reaction.....	3	..	..	..	3	..
Sexual deviation.....	1	..	..	..	1	..
Alcoholism (addiction).....	28	..	1	..	27	..
Drug addiction.....	8	..	..	..	8	..
TOTAL PERSONALITY DISORDERS.....	61	..	1	..	60	..
TRANSIENT SITUATIONAL PERSONALITY DISTURBANCE.....	2	..	..	..	2	..
MENTAL DEFICIENCY.....	22	..	7	15	..	..
WITHOUT MENTAL DISORDER.....	21	..	..	..	21	..
GRAND TOTAL.....	576	6	426	21	83	40

TABLE 5—ALL DISCHARGES BY CONDITION ON DISCHARGE AND MENTAL DISORDER—
COLORED MALE

Report for Year Ending June 30, 1957

MENTAL DISORDERS	Condition on Discharge					
	Total	Recovered	Improved	Unimproved	Unchanged	Unclassified
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:						
Alcohol intoxication.....	50	42	1	..	..	7
Drug or poison intoxication (except alcohol).....	1	1	..	..	..	..
All other conditions.....	5	4	..	..	..	1
TOTAL ACUTE BRAIN SYNDROMES.....	56	47	1	..	..	8
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:						
Meningoencephalitic syphilis.....	5	..	5	..	..	..
Other intracranial infections.....	1	..	..	..	..	1
Alcohol intoxication.....	29	2	27	..	..	..
Other trauma.....	1	..	1	..	..	..
Cerebral arteriosclerosis.....	25	..	21	2	..	2
Convulsive disorder.....	8	..	8	..	..	..
Senile brain disease.....	1	..	..	1	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	70	2	62	3	..	3
PSYCHOTIC DISORDERS:						
Manic-depressive reaction.....	12	..	12	..	..	..
Schizophrenic reactions.....	83	1	72	4	..	6
TOTAL PSYCHOTIC DISORDERS.....	95	1	84	4	..	6
PSYCHONEUROTIC REACTIONS.....	1	..	..	..	..	1
PERSONALITY DISORDERS:						
Antisocial reaction.....	1	..	..	..	1	..
Alcoholism (addiction).....	2	1	..	..	1	..
TOTAL PERSONALITY DISORDERS.....	3	1	..	..	2	..
MENTAL DEFICIENCY.....	6	..	3	..	3	..
WITHOUT MENTAL DISORDERS.....	40	..	..	..	40	..
GRAND TOTAL.....	271	51	150	7	45	18

TABLE 5—ALL DISCHARGES BY CONDITION ON DISCHARGE AND MENTAL DISORDER—
COLORED FEMALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Condition on Discharge					
	Total	Recovered	Improved	Unimproved	Unchanged	Unclassified
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:						
Alcohol intoxication.....	7	4	1	..	..	2
Drug or poison intoxication (except alcohol).....	1	..	1	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	8	4	2	..	..	2
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:						
Meningoencephalitic syphilis.....	4	..	4	..	..	..
Alcohol intoxication.....	1	..	1	..	..	..
Cerebral arteriosclerosis.....	29	..	28	1	..	..
Convulsive disorder.....	7	..	6	1	..	..
Senile brain disease.....	7	..	5	2	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	48	..	44	4	..	..
PSYCHOTIC DISORDERS:						
Involuntional psychotic reaction.....	1	..	1	..	..	..
Manic-depressive reaction.....	61	..	60	..	..	1
Schizophrenic reactions.....	106	2	96	7	..	1
TOTAL PSYCHOTIC DISORDERS.....	168	2	157	7	..	2
PSYCHONEUROTIC REACTIONS.....	5	..	5	..	..	..
PERSONALITY DISORDERS:						
Personality pattern disturbance.....	1	..	1	..	..	..
TOTAL PERSONALITY DISORDERS.....	1	..	1	..	..	..
MENTAL DEFICIENCY.....	24	..	23	..	1	..
WITHOUT MENTAL DISORDER.....	15	..	..	..	15	..
GRAND TOTAL.....	269	6	232	11	16	4

TABLE 6—ALL DEATHS—FIRST ADMISSIONS BY AGE AT DEATH AND MENTAL DISORDER—
WHITE MALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	AGE (in years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	1	..	..	..	1	..	..	..	..	..	..
Drug or poison intoxication (except alcohol).....	1	..	..	..	..	1	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	2	..	..	..	1	1	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic syphilis.....	1	..	..	..	..	..	..	1	..	..	..
Cerebral arteriosclerosis.....	88	..	..	..	..	3	12	33	29	11	..
Other circulatory disturbance.....	7	..	..	..	..	..	3	3	1	..	..
Convulsive disorder.....	3	..	..	..	1	2	..	..	..	..	..
Senile brain disease.....	12	..	..	..	..	..	1	1	5	5	..
Other disturbance of metabolism, growth, and nutrition	2	..	..	..	..	..	1	..	1	..	..
Intracranial neoplasm.....	1	..	..	..	..	..	..	..	1	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	114	..	..	..	1	5	17	38	37	16	..
PSYCHOTIC DISORDERS:											
Involutional psychotic reaction.....	2	..	..	..	..	..	..	2	..	..	..
Manic-depressive reaction.....	2	..	..	..	..	..	..	2	..	..	..
Schizophrenic reactions.....	9	..	..	..	2	1	1	4	1	..	..
Paranoid reaction.....	1	..	..	..	..	..	..	..	1	..	..
TOTAL PSYCHOTIC DISORDERS.....	14	..	..	..	2	1	1	8	2	..	..
PSYCHONEUROTIC REACTIONS.....	1	..	..	..	..	..	1	..	..	..	..
GRAND TOTAL.....	131	..	..	..	4	7	19	46	39	16	..

TABLE 6—ALL DEATHS—FIRST ADMISSIONS BY AGE AT DEATH AND MENTAL DISORDER—
WHITE FEMALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	AGE (in years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic syphilis.....	2	..	..	..	1	1	..	..	..	..	..
Cerebral arteriosclerosis.....	53	..	..	..	..	1	9	24	14	5	..
Other circulatory disturbance.....	33	..	..	..	..	1	..	1	1	..	..
Convulsive disorder.....	28	..	1	..	..	1	..	..	..	..	..
Senile brain disease.....	41	..	..	..	..	1	..	6	19	15	..
Other disturbance of metabolism, growth, and nutrition	3	..	1	..	..	..	..	2	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	104	..	2	..	1	5	9	33	34	20	..
PSYCHOTIC DISORDERS:											
Manic-depressive reaction.....	3	..	..	..	..	..	3	..	..	..	..
Schizophrenic reactions.....	15	..	..	1	3	3	2	4	2	..	..
Paranoid reactions.....	1	..	..	..	..	..	..	1	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	19	..	..	1	3	3	5	4	3	..	..
MENTAL DEFICIENCY.....	4	..	..	..	..	1	1	..	1	1	..
GRAND TOTAL.....	127	..	2	1	4	9	15	37	38	21	..

TABLE 6—ALL DEATHS—FIRST ADMISSIONS BY AGE AT DEATH AND MENTAL DISORDER—
COLORED MALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	AGE (in years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
All other conditions.....	1	..	..	..	..	1	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	1	..	..	..	..	1	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic syphilis.....	11	..	..	1	1	1	3	4	1	..	..
Cerebral arteriosclerosis.....	48	..	..	..	1	6	13	16	10	1	1
Other circulatory disturbance.....	2	..	..	..	..	1	..	1	..	..	..
Convulsive disorder.....	1	..	1	..	..	..	..	..	..	..	..
Senile brain disease.....	4	..	..	..	..	..	..	..	4	..	..
Chronic brain syndrome of unknown cause.....	1	..	..	..	1	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	67	..	1	1	3	8	16	21	15	1	1
PSYCHOTIC DISORDERS:											
Manic-depressive reaction.....	1	..	..	1	..	..	..	..	..	..	..
Schizophrenic reactions.....	11	..	..	1	..	2	5	2	1	..	..
TOTAL PSYCHOTIC DISORDERS.....	12	..	..	2	..	2	5	2	1	..	..
MENTAL DEFICIENCY.....	2	..	..	2	..	..	..	..	..	..	..
WITHOUT MENTAL DISORDERS.....	1	..	..	..	1	..	..	..	..	..	..
GRAND TOTAL.....	83	..	1	5	4	11	21	23	16	1	1

TABLE 6—ALL DEATHS—FIRST ADMISSIONS BY AGE AT DEATH AND MENTAL DISORDER—
COLORED FEMALE

Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	AGE (in years)							
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:									
Meningoencephalitic syphilis.....	1	..	..	..	..	2	10	11	1
Cerebral arteriosclerosis.....	24	..	..	..	..	1	..	..	..
Other circulatory disturbance.....	1	..	..	..	..	..	..	..	..
Convulsive disorder.....	1	..	..	..	1	..	..	..	..
Senile brain disease.....	22	..	..	..	..	1	9	7	5
Chronic brain syndrome of unknown cause.....	1	..	1	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	50	..	1	..	1	3	11	20	9
PSYCHOTIC DISORDERS:									
Manic-depressive reaction.....	2	..	..	..	1	1	..	..	..
Schizophrenic reactions.....	5	..	..	..	1	1	1	..	1
TOTAL PSYCHOTIC DISORDERS.....	7	..	..	..	2	2	1	1	1
MENTAL DEFICIENCY.....	3	..	..	..	1	..	..	1	1
WITHOUT MENTAL DISORDER.....	1	..	..	..	..	1	..	..	..
GRAND TOTAL.....	61	..	1	..	4	6	12	22	9

TABLE 6—ALL DEATHS—READMISSIONS BY AGE AT DEATH AND MENTAL DISORDER—
WHITE MALE

Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	AGE (in years)								
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:										
Alcohol intoxication.....	1	..	..	..	..	1	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	1	..	..	..	..	1	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:										
Meningoencephalitic syphilis.....	1	..	..	..	..	..	1	..	3	..
Cerebral arteriosclerosis.....	6	..	..	..	..	1	2	..	..	..
Senile brain disease.....	3	..	..	..	..	..	..	1	1	1
TOTAL CHRONIC BRAIN SYNDROMES.....	10	..	..	..	..	1	3	1	4	1
PSYCHOTIC DISORDERS:										
Involutional psychotic reaction.....	1	..	..	..	..	..	..	..	1	..
Manic-depressive reaction.....	4	..	..	..	..	..	1	1	2	..
Schizophrenic reactions.....	5	..	..	..	..	1	2	2	..	..
Paranoid reactions.....	1	..	..	..	..	..	..	1	..	..
TOTAL PSYCHOTIC DISORDERS.....	11	..	..	..	..	1	3	4	3	..
PSYCHONEUROTIC REACTIONS.....	2	..	..	..	..	..	1	1	..	..
GRAND TOTAL.....	24	..	..	..	..	3	7	6	7	1

TABLE 6—ALL DEATHS—READMISSIONS BY AGE AT DEATH AND MENTAL DISORDER—
WHITE FEMALE

Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	AGE (in years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over Age Un- known	
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Cerebral arteriosclerosis.....	3	..	..	..	..	..	..	1	1	1	..
Convulsive disorder.....	1	..	..	..	1	..	..	..	..	..	..
Senile brain disease.....	2	..	..	..	..	..	..	..	1	1	..
Diseases of unknown and uncertain cause.....	2	..	..	..	1	1	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	8	..	..	..	2	1	..	1	2	2	..
PSYCHOTIC DISORDERS:											
Manic-depressive reaction.....	3	..	..	..	..	..	2	1	..	..	..
Schizophrenic reactions.....	6	..	..	..	1	1	..	3	1	..	..
TOTAL PSYCHOTIC DISORDERS.....	9	..	..	..	1	1	2	4	1	..	..
PSYCHONEUROTIC REACTIONS.....	2	..	..	..	..	..	..	..	2	..	..
MENTAL DEFICIENCY.....	1	..	..	..	..	..	..	..	1	..	..
GRAND TOTAL.....	20	..	..	..	3	2	2	5	6	2	..

TABLE 6—ALL DEATHS—READMISSIONS BY AGE AT DEATH AND MENTAL DISORDER—
COLORED MALE

Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	AGE (in years)							
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:									85 & Over
Cerebral arteriosclerosis.....	6	..	..	..	..	..	..	1	5
Other circulatory disturbance.....	1	..	..	..	..	..	1	..	..
Convulsive disorder.....	2	..	..	..	1	..	1	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	9	..	..	..	1	..	2	1	5
PSYCHOTIC DISORDERS:									Age Un-
Manic-depressive reaction.....	3	..	..	..	..	..	2	..	known
Schizophrenic reactions.....	1	..	..	..	..	1	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	4	..	..	..	..	1	2	..	1
MENTAL DEFICIENCY.....	1	..	..	..	..	1	..	..	..
GRAND TOTAL.....	14	..	..	..	1	2	4	1	5

TABLE 6—ALL DEATHS—READMISSIONS BY AGE AT DEATH AND MENTAL DISORDER—
COLORED FEMALE

Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	AGE (in years)							
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:									85 & Over
Cerebral arteriosclerosis.....	1	..	..	..	..	1	..	..	..
Senile brain disease.....	2	..	..	..	..	..	..	1	1
TOTAL CHRONIC BRAIN SYNDROMES.....	3	..	..	..	..	1	..	1	1
PSYCHOTIC DISORDERS:									Age Un-
Manic-depressive reaction.....	1	..	..	..	..	..	..	1	..
Schizophrenic reactions.....	2	..	..	..	2	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	3	..	..	..	2	..	..	1	..
GRAND TOTAL.....	6	..	..	..	2	1	..	2	1

TABLE 7—ALL DEATHS—FIRST ADMISSIONS BY NET LENGTH OF TIME IN HOSPITAL AND MENTAL DISORDER—WHITE MALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	NET LENGTH OF TIME IN HOSPITAL FOR THIS ADMISSION												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:														
Alcohol intoxication.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
Drug or poison intoxication (except alcohol).....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	2	2	..	..	..	..	..	..	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	1	..	..	..	..	..	..	..	..	..	1	..	..	..
Cerebral arteriosclerosis.....	88	25	15	10	21	8	2	2	4	1	..	..	..	..
Other circulatory disturbance.....	7	2	2	..	..	1	1	..	1	..	..	..	..	..
Convulsive disorder.....	3	..	..	..	..	..	..	..	..	2	1	..	..	..
Senile brain disease.....	12	1	..	1	1	4	4	..	1	..	..	..	..	..
Other disturbance of metabolism, growth, and nutrition.....	2	1	..	..	..	..	..	..	..	1	..	..	..	..
Intracranial neoplasm.....	1	..	1	..	..	..	..	..	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	114	29	18	11	22	13	7	2	6	4	2	..	..	..
PSYCHOTIC DISORDERS:														
Involuntary Psychotic reaction.....	2	..	..	..	..	..	..	..	..	..	..	2	..	..
Manic-depressive reaction.....	2	..	..	1	..	..	..	1	..	..	..	..	..	..
Schizophrenic reactions.....	9	..	..	..	..	..	..	..	..	2	1	..	1	5
Paranoid reactions.....	1	..	..	..	..	..	..	..	..	1	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	14	..	..	1	..	..	..	1	..	3	1	2	1	5
PSYCHONEUROTIC REACTIONS.....	1	..	..	..	..	1	..	..	..	..	..	..	..	..
GRAND TOTAL.....	131	31	18	12	22	14	7	3	6	7	3	2	1	5

TABLE 7—ALL DEATHS—FIRST ADMISSIONS BY NET LENGTH OF TIME IN HOSPITAL AND MENTAL DISORDER—WHITE FEMALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	NET LENGTH OF TIME IN HOSPITAL FOR THIS ADMISSION												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	2	..	..	..	..	..	..	..	1	1	..	..	..	..
Cerebral arteriosclerosis.....	53	17	6	7	6	5	3	4	5	..	..	..	..	..
Other circulatory disturbance.....	3	1	..	1	1	..	..	..	..	..	..	..	..	..
Convulsive disorder.....	2	..	..	..	..	..	..	..	..	..	..	1	..	..
Senile brain disease.....	41	9	7	6	5	9	1	2	1	1	..	..	..	..
Other disturbance of metabolism, growth, and nutrition.....	3	1	..	..	..	..	..	..	1	..	..	..	1	..
TOTAL CHRONIC BRAIN SYNDROMES.....	104	28	13	14	13	14	4	6	8	2	..	1	1	..
PSYCHOTIC DISORDERS:														
Manic-depressive reaction.....	3	..	..	..	..	..	..	..	2	2	..	..	2	1
Schizophrenic reactions.....	15	..	..	1	..	1	..	..	2	2	2	..	2	5
Paranoid reactions.....	1	..	..	..	..	..	..	..	..	..	..	1	..	..
TOTAL PSYCHOTIC DISORDERS.....	19	..	..	1	..	1	..	..	2	2	2	1	4	6
MENTAL DEFICIENCY.....	4	..	..	..	1	..	..	..	..	..	1	..	..	2
GRAND TOTAL.....	127	28	13	15	14	15	4	6	10	4	3	2	5	8

TABLE 7—ALL DEATHS—FIRST ADMISSIONS BY NET LENGTH OF TIME IN HOSPITAL AND MENTAL DISORDER—COLORED MALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	NET LENGTH OF TIME IN HOSPITAL FOR THIS ADMISSION												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:														
All other conditions.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	11	1	..	1	..	1	3	..	2	3	..	..	..	..
Cerebral arteriosclerosis.....	48	12	6	7	10	3	1	3	4	12	..	..	..	..
Other circulatory disturbance.....	2	1	..	..	..	..	..	..	..	..	1	..	..	..
Convulsive disorder.....	1	..	..	..	1	..	..	..	..	..	..	..	..	..
Senile brain disease.....	4	1	..	..	..	1	..	1	1	..	..	..	..	..
Chronic brain syndrome of unknown cause.....	1	..	..	..	..	1	..	..	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	67	15	6	8	11	6	4	4	7	5	1	..	..	..
PSYCHOTIC DISORDERS:														
Manic-depressive reaction.....	1	..	..	..	..	..	..	..	1	..	..	..	..	..
Schizophrenic reactions.....	11	..	1	..	..	..	1	..	2	..	..	1	2	4
TOTAL PSYCHOTIC DISORDERS.....	12	..	1	..	..	..	1	..	3	..	..	1	2	4
MENTAL DEFICIENCY.....	2	..	..	..	1	..	..	..	..	..	1	..	..	..
WITHOUT MENTAL DISORDER.....	1	..	..	..	1	..	..	..	..	..	..	..	..	..
GRAND TOTAL.....	83	16	7	8	13	6	5	4	10	5	2	1	2	4

TABLE 7—ALL DEATHS—FIRST ADMISSIONS BY NET LENGTH OF TIME IN HOSPITAL AND MENTAL DISORDER—COLORED FEMALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	NET LENGTH OF TIME IN HOSPITAL FOR THIS ADMISSION												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	1	..	..	..	..	..	..	..	1	..	..	..	..	..
Cerebral arteriosclerosis.....	24	4	2	2	3	4	2	3	2	..	..	..	1	..
Other circulatory disturbance.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
Convulsive disorder.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
Senile brain disease.....	22	4	2	2	11	2	..	..	..	..	..	..	..	..
Chronic brain syndromes of unknown cause.....	1	..	..	..	..	..	..	..	1	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	50	10	4	5	14	7	2	3	4	..	..	..	1	..
PSYCHOTIC DISORDERS:														
Manic-depressive reaction.....	2	..	..	..	..	..	..	..	..	..	2	..	..	..
Schizophrenic reactions.....	5	..	1	..	1	..	..	..	..	..	..	..	..	2
TOTAL PSYCHOTIC DISORDERS.....	7	..	1	..	1	..	..	..	..	..	2	..	..	2
MENTAL DEFICIENCY.....	3	..	..	..	..	..	1	..	..	..	1	..	..	1
WITHOUT MENTAL DISORDER.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
GRAND TOTAL.....	61	11	5	5	15	7	3	3	4	..	3	..	1	4

TABLE 7—ALL DEATHS—READMISSIONS BY NET LENGTH OF TIME IN HOSPITAL AND MENTAL DISORDER—WHITE MALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	NET LENGTH OF TIME IN HOSPITAL FOR THIS ADMISSION												
	Total	Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:													
Alcohol intoxication.....	1	1	..	..	..	..	..	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	1	1	..	..	..	..	..	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:													
Meningocephalitic syphilis.....	1	..	..	..	..	..	..	..	1	..	..	..	..
Cerebral arteriosclerosis.....	6	2	..	1	..	..	..	1	2	..	..	..	..
Senile brain disease.....	3	1	1	..	..	..	..	..	..	..	..	1	..
TOTAL CHRONIC BRAIN SYNDROMES.....	10	3	1	1	..	..	..	1	3	..	..	1	..
PSYCHOTIC DISORDERS:													
Involuntary psychotic reaction.....	1	1	..	..	..	..	..	..	..	..	..	..	..
Manic-depressive reaction.....	4	1	..	..	..	..	..	..	1	..	1	1	..
Schizophrenic reactions.....	5	2	..	..	..	..	..	..	..	1	1	..	1
Paranoid reactions.....	1	1	..	..	..	..	..	..	..	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	11	5	..	..	..	..	..	1	..	2	2	..	1
PSYCHONEUROTIC REACTIONS.....	2	2	..	..	..	..	..	..	..	..	..	..	..
GRAND TOTAL.....	24	11	1	1	..	..	..	1	4	..	2	2	1

TABLE 1—ALL DEATHS—READMISSIONS BY NET LENGTH OF TIME IN HOSPITAL AND MENTAL DISORDER—WHITE FEMALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	NET LENGTH OF TIME IN HOSPITAL FOR THIS ADMISSION												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Cerebral arteriosclerosis.....	3	..	..	..	1	..	..	1	1	..	..	..	..	..
Convulsive disorder.....	1	..	1	..	..	..	..	..	..	..	..	..	..	..
Senile brain disease.....	2	1	..	..	..	..	..	..	1	..	..	..	..	..
Diseases of unknown and uncertain cause.....	2	1	..	1	..	..	..	..	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	8	2	1	1	1	..	..	1	2	..	..	..	..	..
PSYCHOTIC DISORDERS:														
Manic-depressive reaction.....	3	..	1	1	..	..	..	..	..	1	..	..	..	..
Schizophrenic reactions.....	6	..	..	..	1	..	..	..	1	..	..	..	1	3
TOTAL PSYCHOTIC DISORDERS.....	9	..	1	1	1	..	..	..	1	1	..	..	1	3
PSYCHONEUROTIC REACTIONS.....	2	..	..	..	..	..	1	..	1	..	..	..	..	..
MENTAL DEFICIENCY.....	1	..	..	..	..	..	..	..	..	..	..	1	..	..
GRAND TOTAL.....	20	2	2	2	2	..	1	1	4	1	..	1	1	3

TABLE 7—ALL DEATHS—READMISSIONS BY NET LENGTH OF TIME IN HOSPITAL AND MENTAL DISORDER—COLORED MALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	NET LENGTH OF TIME IN HOSPITAL FOR THIS ADMISSION												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Cerebral arteriosclerosis.....	6	2	..	1	1	1	..	..	1	..	..	..	..	..
Other circulatory disturbance.....	1	..	..	..	..	..	..	..	..	..	1	..	..	..
Convulsive disorder.....	2	..	..	..	..	..	1	..	..	..	..	..	1	..
TOTAL CHRONIC BRAIN SYNDROMES.....	9	2	..	1	1	1	1	..	1	..	1	..	1	..
PSYCHOTIC DISORDERS:														
Manic-depressive reaction.....	3	..	..	..	1	..	..	..	..	1	..	..	1	..
Schizophrenic reactions.....	1	..	..	..	..	..	..	1	..	..	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	4	..	..	..	1	..	..	1	..	1	..	..	1	..
MENTAL DEFICIENCY.....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
GRAND TOTAL.....	14	2	..	2	2	1	1	1	1	1	1	..	2	..

TABLE 7—ALL DEATHS—READMISSIONS BY NET LENGTH OF TIME IN HOSPITAL AND MENTAL DISORDER—COLORED FEMALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	NET LENGTH OF TIME IN HOSPITAL FOR THIS ADMISSION												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Cerebral arteriosclerosis.....	1	..	..	..	1	..	1	..	..	..	..	..	..	..
Senile brain disease.....	2	1	..	..	..	..	..	..	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	3	1	..	..	1	..	1	..	..	..	..	..	..	..
PSYCHOTIC DISORDERS:														
Manic-depressive reaction.....	1	..	..	..	..	..	..	..	..	..	..	..	1	..
Schizophrenic reactions.....	2	1	..	..	1	..	..	..	..	..	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	3	1	..	..	1	..	..	..	..	..	..	..	1	..
GRAND TOTAL.....	6	2	..	..	2	..	1	..	..	..	..	..	1	..

TABLE 8—PATIENTS ON BOOKS—FIRST ADMISSIONS AT END OF YEAR BY AGE AT END OF YEAR
AND MENTAL DISORDER—WHITE MALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	AGE (in years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	2	..	..	..	1	..	..	1	..	..	..
Drug or poison intoxication (except alcohol).....	1	..	..	..	..	1	..	..	..	..	..
All other conditions.....	1	..	..	..	1	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	4	..	..	..	2	1	..	1	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic syphilis.....	70	..	..	5	5	28	12	17	3	..	..
Other CNS syphilis.....	3	..	..	..	..	..	2	1	..	..	..
Epidemic encephalitis.....	1	..	1	..	..	..	..	..	..	..	..
Other intracranial infections.....	1	1	..	..	..	..	..	..	..	..	..
Alcohol intoxication.....	4	..	..	..	1	1	2	..	..	..	..
Drug or poison intoxication (except alcohol).....	2	..	..	..	1	..	1	..	..	..	..
Birth trauma.....	2	..	..	..	1	1	..	..	..	..	..
Other trauma.....	8	..	..	2	3	1	1	..	..	..	..
Cerebral arteriosclerosis.....	246	..	1	2	1	15	38	91	89	9	..
Other circulatory disturbance.....	13	..	2	1	2	1	1	1	5	..	..
Convulsive disorder.....	62	..	3	14	14	13	12	3	1	2	..
Senile brain disease.....	15	..	..	..	..	..	1	6	4	4	..
Other disturbance of metabolism, growth, and nutrition	5	..	..	..	..	..	1	2	2	..	..
Intracranial neoplasm.....	5	..	1	2	1	1	..	..	..	..	..
Diseases of unknown and uncertain cause.....	5	..	..	..	3	1	1	..	..	..	..
Chronic brain syndrome of unknown cause.....	2	..	..	..	1	1	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	444	1	8	26	33	63	72	121	105	15	..
PSYCHOTIC DISORDERS:											
Involuntary psychotic reaction.....	15	..	..	..	..	5	8	..	2	..	..
Manic-depressive reaction.....	85	..	3	5	11	29	20	16	..	..	1
Psychotic depressive reaction.....	2	..	..	..	..	2	..	..	..	..	..
Schizophrenic reactions.....	585	1	37	118	161	139	85	28	13	2	1
Paranoid reactions.....	20	..	..	..	1	2	8	5	2	1	1
Other	2	..	..	..	..	1	1	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	709	1	40	123	173	178	122	49	17	3	3
PSYCHOPHYSIOLOGIC AUTONOMIC AND VISCERAL DISORDERS											
.....	2	..	1	..	..	1	..	..	..	..	..
PSYCHONEUROTIC REACTIONS.....											
.....	51	..	4	10	12	19	4	1	1	..	..
PERSONALITY DISORDERS:											
Personality pattern disturbance.....	1	..	1	..	..	..	..	..	..	..	..
Personality trait disturbance.....	3	..	..	2	1	..	..	..	..	..	..
Antisocial reaction.....	2	..	..	..	..	..	2	..	..	..	..
Alcoholism (addiction).....	19	..	..	2	7	8	1	1	..	..	..
Drug addiction.....	1	..	..	..	..	1	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	26	..	1	4	8	9	3	1	..	..	..
MENTAL DEFICIENCY.....											
.....	110	..	9	20	36	25	15	5	..	..	..
WITHOUT MENTAL DISORDER.....											
.....	11	..	2	3	4	1	..	..	..	..	1
GRAND TOTAL.....	1357	2	65	186	268	297	216	178	123	18	4

TABLE 8—PATIENTS ON BOOKS—FIRST ADMISSIONS AT END OF YEAR BY AGE AT END OF YEAR
AND MENTAL DISORDER—WHITE FEMALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	AGE (in years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
Drug or poison intoxication (except alcohol).....	1	..	..	..	1	..	..	..	..	..	..
All other conditions.....	1	..	..	..	..	1	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	2	..	..	..	1	1	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic syphilis.....	22	..	..	..	4	9	5	3	1	..	..
Epidemic encephalitis.....	3	..	..	..	1	2	..	..	..	..	..
Other intracranial infections.....	1	..	..	..	..	1	..	..	..	..	..
Alcohol intoxication.....	1	..	..	..	1	..	..	..	..	..	..
Cerebral arteriosclerosis.....	219	..	..	..	..	11	45	99	53	10	1
Other circulatory disturbance.....	14	..	..	3	2	1	6	2	..	..	..
Convulsive disorder.....	48	..	2	7	11	15	7	5	..	..	1
Senile brain disease.....	80	..	..	..	1	..	4	16	54	5	..
Other disturbance of metabolism, growth, and nutrition	10	..	..	..	..	2	3	4	1	..	..
Intracranial neoplasm.....	2	..	..	1	1	..	..	..	..	..	..
Diseases of unknown and uncertain cause.....	8	..	..	2	1	1	3	1	..	..	..
Chronic brain syndromes of unknown cause.....	6	..	..	3	..	2	1	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	414	..	2	16	22	44	74	130	109	15	2
PSYCHOTIC DISORDERS:											
Involutional psychotic reaction.....	29	..	..	..	..	5	9	10	4	1	..
Manic-depressive reaction.....	37	..	..	2	6	13	7	5	4	..	..
Schizophrenic reactions.....	739	..	29	97	191	169	135	84	17	5	12
Paranoid reactions.....	32	..	..	..	2	5	11	12	2	..	..
Other	2	..	..	1	..	..	1	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	839	..	29	100	199	192	163	111	27	6	12
PSYCHONEUROTIC REACTIONS.....	123	..	5	22	37	33	20	4	..	1	1
PERSONALITY DISORDERS:											
Personality trait disturbance.....	2	..	..	1	1	..	..	..	..	..	..
Antisocial reaction.....	1	..	..	..	..	..	1	..	..	..	..
Drug addiction.....	1	..	..	..	1	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	4	..	..	1	2	..	1	..	..	..	..
MENTAL DEFICIENCY.....	70	..	3	5	11	17	18	10	5	..	1
WITHOUT MENTAL DISORDER.....	2	..	..	..	1	1	..	..	..	..	..
GRAND TOTAL.....	1454	..	39	144	273	288	276	255	141	22	16

TABLE 8—PATIENTS ON BOOKS—FIRST ADMISSIONS AT END OF YEAR BY AGE AT END OF YEAR
AND MENTAL DISORDER—COLORED MALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	AGE (in years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	11	..	1	4	2	4	..	..	..	..	..
All other conditions.....	4	..	..	1	..	3	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	15	..	1	5	2	7	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic syphilis.....	131	..	2	7	22	57	28	10	5	..	..
Other CNS syphilis.....	2	..	..	..	..	1	1	..	..	..	..
Epidemic encephalitis.....	23	..	..	..	1	1	..	..	..	..	..
Alcohol intoxication.....	23	..	..	5	7	9	1	..	..	1	..
Birth trauma.....	8	..	4	2	1	1	..	..	..	..	..
Other trauma.....	7	..	..	1	3	1	2	..	..	..	..
Cerebral arteriosclerosis.....	200	..	..	..	1	52	62	58	20	5	2
Other circulatory disturbance.....	11	..	..	2	..	1	3	2	2	1	..
Convulsive disorder.....	73	..	11	30	21	6	5	..	..	..	..
Senile brain disease.....	9	..	..	..	..	..	..	1	6	2	..
Other disturbance of metabolism, growth, and nutrition	3	..	..	..	1	1	1	..	..	..	..
Diseases of unknown and uncertain cause.....	5	..	..	..	4	..	1	..	..	..	..
Chronic brain syndromes of unknown cause.....	5	..	1	2	1	..	1	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	479	..	18	49	62	129	106	71	33	9	2
PSYCHOTIC DISORDERS:											
Manic-depressive reaction.....	39	..	2	6	8	13	8	1	..	..	1
Schizophrenic reactions.....	737	3	86	211	226	107	49	39	5	1	10
Other	2	..	..	..	..	..	1	..	..	..	1
TOTAL PSYCHOTIC DISORDERS.....	778	3	88	217	234	120	58	40	5	1	12
PSYCHONEUROTIC REACTIONS.....	1	..	..	..	..	1	..	..	..	..	..
PERSONALITY DISORDERS:											
Personality pattern disturbance.....	1	..	..	1	..	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	1	..	..	1	..	..	..	..	..	..	..
MENTAL DEFICIENCY.....	254	2	44	66	68	36	21	11	1	..	5
WITHOUT MENTAL DISORDER.....	*4	1	2	1	..	..	..	..	..	..	..
GRAND TOTAL.....	1532	6	153	339	366	293	185	122	39	10	19

TABLE 8—PATIENTS ON BOOKS—FIRST ADMISSIONS AT END OF YEAR BY AGE AT END OF YEAR
AND MENTAL DISORDER—COLORED FEMALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	AGE (in years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
All other conditions.....	1	..	..	..	..	1	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	1	..	..	..	..	1	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic syphilis.....	25	..	..	1	7	12	1	4	..	..	..
Epidemic encephalitis.....	1	..	..	1	..	..	..	..	..	..	..
Alcohol intoxication.....	3	..	..	..	2	..	1	..	..	..	..
Birth trauma.....	1	..	..	1	..	..	..	..	..	..	..
Other trauma.....	3	..	..	1	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	140	..	..	1	2	27	50	45	15	1	..
Other circulatory disturbance.....	16	..	..	1	..	4	5	3	2	1	..
Convulsive disorder.....	57	..	4	19	20	8	2	4	..	..	..
Senile brain disease.....	77	..	..	..	..	2	2	29	30	14	..
Other disturbance of metabolism, growth, and nutrition.....	17	..	..	..	3	8	3	2	1	..	..
Diseases of unknown and uncertain cause.....	1	..	..	..	1	..	..	..	..	..	..
Chronic brain syndromes of unknown cause.....	3	..	1	1	..	1	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	344	..	6	25	35	63	64	87	48	16	..
PSYCHOTIC DISORDERS:											
Involuntary psychotic reaction.....	1	..	..	..	..	1	..	..	..	..	..
Manic-depressive reaction.....	148	..	4	19	45	46	21	9	3	..	1
Schizophrenic reactions.....	654	2	40	164	189	128	68	42	12	2	7
Paranoid reactions.....	12	..	..	1	1	4	3	2	1	..	..
TOTAL PSYCHOTIC DISORDERS.....	815	2	44	184	235	179	92	53	16	2	8
PSYCHONEUROTIC REACTIONS.....	3	..	1	..	1	..	1	..	..	..	..
PERSONALITY DISORDERS:											
Drug addiction.....	1	..	..	..	..	1	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	1	..	..	..	..	1	..	..	..	..	..
MENTAL DEFICIENCY.....	124	..	7	27	32	30	13	10	3	1	1
WITHOUT MENTAL DISORDER.....	2	..	..	..	2	..	..	..	..	..	..
GRAND TOTAL.....	1290	2	58	236	305	274	170	150	67	19	9

TABLE 8—PATIENTS ON BOOKS—READMISSIONS AT END OF YEAR BY AGE AT END OF YEAR
AND MENTAL DISORDER—WHITE MALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	AGE (in years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
All other conditions.....	2	..	..	1	..	..	1	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	2	..	..	1	..	..	1	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic syphilis.....	20	..	..	..	4	11	4	1	..	..	..
Epidemic encephalitis.....	5	..	..	1	..	2	2	..	..	..	..
Alcohol intoxication.....	2	..	..	..	..	1	1	..	..	..	..
Other trauma.....	8	..	..	2	1	3	1	1	..	..	..
Cerebral arteriosclerosis.....	38	..	..	..	..	6	11	13	7	..	1
Other circulatory disturbance.....	6	..	..	..	1	3	1	..	1	..	..
Convulsive disorder.....	39	..	2	4	10	14	7	2	..	..	..
Senile brain disease.....	2	..	..	..	..	..	..	..	1	1	..
Intracranial neoplasm.....	1	..	..	..	..	1	..	..	..	..	..
Diseases of unknown and uncertain cause.....	2	..	..	..	1	..	1	..	..	..	..
Chronic brain syndrome of unknown cause.....	2	..	..	..	..	2	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	125	..	2	7	17	43	28	17	9	1	1
PSYCHOTIC DISORDERS:											
Involuntional psychotic reaction.....	7	..	..	..	1	..	5	1	..	..	..
Manic-depressive reaction.....	76	..	..	..	6	22	24	18	5	..	1
Schizophrenic reactions.....	284	..	9	54	77	84	32	19	6	..	3
Paranoid reactions.....	1	..	..	..	..	..	..	..	1	..	..
TOTAL PSYCHOTIC DISORDERS.....	368	..	9	54	84	106	61	38	12	..	4
PSYCHONEUROTIC REACTIONS.....	16	..	..	2	5	4	4	1	..	..	..
PERSONALITY DISORDERS:											
Personality pattern disturbance.....	2	..	..	..	1	..	..	1	..	..	..
Alcoholism (addiction).....	6	..	..	..	..	4	..	2	..	..	..
TOTAL PERSONALITY DISORDERS.....	8	..	..	..	1	4	..	3	..	..	..
MENTAL DEFICIENCY.....	33	..	1	6	11	7	6	2	..	..	..
WITHOUT MENTAL DISORDER.....	3	..	..	1	1	1	..	..	..	..	..
GRAND TOTAL.....	555	..	12	71	119	165	100	61	21	1	5

TABLE 8—PATIENTS ON BOOKS—READMISSIONS AT END OF YEAR BY AGE AT END OF YEAR
AND MENTAL DISORDER—WHITE FEMALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	AGE (in years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic syphilis.....	7	..	..	..	1	3	3	..	..	..	..
Epidemic encephalitis.....	2	..	..	1	..	1	..	..	..	..	..
Birth trauma.....	1	..	..	1	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	76	..	..	..	..	2	17	38	18	..	1
Other circulatory disturbance.....	10	..	..	..	2	4	1	1	2	..	..
Convulsive disorder.....	47	..	1	5	8	16	11	4	1	1	..
Senile brain disease.....	3	..	..	..	..	..	..	1	2	..	..
Other disturbance of metabolism, growth, and nutrition	1	..	..	..	..	..	1	..	..	..	..
Intracranial neoplasm.....	1	..	..	..	..	..	1	..	..	..	..
Diseases of unknown and uncertain cause.....	1	..	..	..	..	1	..	..	..	..	..
Chronic brain syndrome of unknown cause.....	1	..	..	..	..	1	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	150	..	1	7	11	28	34	44	23	1	1
PSYCHOTIC DISORDERS:											
Involuntary psychotic reaction.....	5	..	..	..	..	2	2	1	..	..	..
Manic-depressive reaction.....	63	..	..	1	5	19	15	16	6	1	..
Schizophrenic reactions.....	425	..	10	47	112	130	73	39	11	2	1
Paranoid reactions.....	19	..	..	..	1	2	10	3	3	..	..
TOTAL PSYCHOTIC DISORDERS.....	512	..	10	48	118	153	100	59	20	3	..
PSYCHONEUROTIC REACTIONS.....	55	..	..	4	15	21	10	5	..	..	..
PERSONALITY DISORDERS:											
Personality pattern disturbance.....	2	..	..	1	..	1	..	..	..	..	..
Antisocial reaction.....	4	..	1	..	..	..	1	2	..	..	..
TOTAL PERSONALITY DISORDERS.....	6	..	1	1	..	1	1	2	..	..	..
MENTAL DEFICIENCY.....	29	..	..	1	6	9	7	4	2	..	..
WITHOUT MENTAL DISORDER.....	2	..	..	..	1	..	1	..	..	..	..
GRAND TOTAL.....	754	..	12	61	151	212	15	114	45	4	2

TABLE 8—PATIENTS ON BOOKS—READMISSIONS AT END OF YEAR BY AGE AT END OF YEAR
AND MENTAL DISORDER—COLORED MALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	AGE (in years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
Alcohol intoxication.....	2	..	..	1	..	1	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	2	..	..	1	..	1	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic syphilis.....	2	..	..	..	1	..	..	1	..	..	..
Alcohol intoxication.....	8	..	..	2	4	..	2	..	..	..	..
Birth trauma.....	2	1	1	..	..	..	..	..	..	..	..
Other trauma.....	1	..	..	..	1	..	..	..	..	..	..
Cerebral arteriosclerosis.....	27	..	..	..	..	5	7	11	4	..	..
Other circulatory disturbance.....	1	..	..	..	..	..	..	..	1	..	..
Convulsive disorder.....	22	..	1	6	3	10	1	1	..	..	..
Other disturbance of metabolism, growth, and nutrition	1	..	..	..	..	..	1	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	64	1	2	8	9	15	11	13	5	..	..
PSYCHOTIC DISORDERS:											
Manic-depressive reaction.....	31	..	1	..	6	9	7	4	3	1	..
Schizophrenic reactions.....	166	..	12	40	43	47	14	6	1	..	3
Paranoid reactions.....	2	..	..	..	..	..	..	1	1	..	..
TOTAL PSYCHOTIC DISORDERS.....	199	..	13	40	49	56	21	11	5	1	3
PERSONALITY DISORDERS:											
Alcoholism (addiction).....	1	..	1	..	..	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	1	..	1	..	..	..	..	..	..	..	..
MENTAL DEFICIENCY.....	25	..	3	4	8	4	3	1	..	..	2
WITHOUT MENTAL DISORDER.....	1	..	1	..	..	..	..	..	..	..	..
GRAND TOTAL.....	292	1	20	53	66	76	35	25	10	1	5

TABLE 8—PATIENTS ON BOOKS—READMISSIONS AT END OF YEAR BY AGE AT END OF YEAR
AND MENTAL DISORDER—COLORED FEMALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	AGE (in years)								
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over Age Un- known
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:										
Meningoencephalitic syphilis.....	5	..	..	..	1	2	..	2	..	..
Birth trauma.....	1	..	..	..	1	..	..	..	..	..
Cerebral arteriosclerosis.....	23	..	..	..	..	6	12	..	2	..
Other circulatory disturbance.....	3	..	..	..	..	1	..	2	..	..
Convulsive disorder.....	18	..	1	7	3	5	2	..	..	..
Senile brain disease.....	7	..	..	..	..	..	..	3	4	..
Other disturbance of metabolism, growth, and nutrition	1	..	..	..	1	..	..	..	..	..
Diseases of unknown and uncertain cause.....	1	..	..	..	..	1	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	59	..	1	7	6	15	14	10	6	..
PSYCHOTIC DISORDERS:										
Manic-depressive reaction.....	92	..	..	14	26	24	16	8	1	2
Schizophrenic reactions.....	195	..	2	49	54	36	23	21	8	2
Paranoid reactions.....	3	..	..	..	..	..	1	2	..	..
TOTAL PSYCHOTIC DISORDERS.....	290	..	2	63	80	60	40	31	9	4
PSYCHONEUROTIC REACTIONS.....	1	..	..	..	..	..	1	..	..	..
MENTAL DEFICIENCY.....	28	..	2	4	12	4	5	..	1	..
WITHOUT MENTAL DISORDER.....	1	..	..	..	..	..	..	1	..	..
GRAND TOTAL.....	379	..	5	74	98	79	60	42	16	4

TABLE 9—PATIENTS ON BOOKS—FIRST ADMISSIONS AT END OF YEAR BY TIME ON BOOKS AND MENTAL DISORDER—WHITE MALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	TIME ON BOOKS												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:														
Alcohol intoxication.....	2	1	..	..	..	..	..	..	1	..	..	..	..	..
Drug or poison intoxication (except alcohol).....	1	..	1	..	..	..	..	..	..	..	..	..	..	..
All other conditions.....	1	..	..	..	..	..	1	..	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	4	1	1	..	..	..	1	..	1	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	70	..	1	..	3	2	1	2	13	24	17	7	..	..
Other CNS syphilis.....	3	..	..	..	..	1	1	..	..	..	..	1	..	..
Epidemic encephalitis.....	1	..	1	..	..	..	..	..	..	..	..	..	..	..
Other intracranial infections.....	1	..	..	..	1	..	..	..	..	..	..	..	..	..
Alcohol intoxication.....	4	..	..	..	2	..	1	..	..	1	..	..	..	..
Drug or poison intoxication (except alcohol).....	2	..	..	..	..	..	..	..	..	1	..	..	..	1
Birth trauma.....	2	1	..	..	1	..	..	..	..	..	..	..	..	..
Other trauma.....	8	1	1	1	1	..	1	1	..	..	2	..	..	..
Cerebral arteriosclerosis.....	246	46	31	37	57	26	11	7	18	11	1	1	1	..
Other circulatory disturbance.....	13	..	1	4	3	..	1	1	1	1	..	..	..	..
Convulsive disorder.....	62	3	1	1	3	..	2	2	10	9	11	13	3	4
Senile brain disease.....	15	1	..	1	4	2	1	2	2	2	..	..	..	..
Other disturbance of metabolism, growth, and nutrition.....	5	..	..	..	..	..	..	..	..	..	1	..	3	1
Intracranial neoplasm.....	5	1	..	1	..	..	1	..	..	2	..	..	..	..
Diseases of unknown and uncertain cause.....	5	..	..	..	2	..	1	1	..	..	1	..	..	..
Chronic brain syndrome of unknown cause.....	2	..	..	..	..	1	..	..	..	1	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	444	53	36	45	77	32	21	16	44	52	33	22	7	6
PSYCHOTIC DISORDERS:														
Involuntional psychotic reaction.....	15	..	..	2	3	..	..	..	3	3	2	1	1	..
Manic-depressive reaction.....	85	5	5	11	5	3	2	1	4	12	15	8	7	7
Psychotic depressive reaction.....	2	..	..	..	2	..	..	..	..	..	..	..	..	..

Schizophrenic reactions.....	585	40	26	55	73	20	16	22	48	54	58	65	36	72
Paranoid reactions.....	20	..	4	1	1	2	..	..	3	1	6	2	..	..
Other	2	..	..	..	..	..	..	..	..	..	..	1	1	..
TOTAL PSYCHOTIC DISORDERS.....	709	45	35	69	84	25	18	23	58	70	81	77	45	79
PSYCHOPHYSIOLOGIC AUTONOMIC AND VISCERAL DISORDERS.....	2	..	..	1	1	..	..	..	..	..	..	..	..	..
PSYCHONEUROTIC REACTIONS.....	51	3	12	11	8	7	1	1	2	3	1	2	..	..
PERSONALITY DISORDERS:														
Personality pattern disturbance.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
Personality trait disturbance.....	3	3	..	..	..	..	..	..	..	..	..	..	..	..
Antisocial reaction.....	2	..	..	..	..	..	..	..	..	1	..	..	1	..
Alcoholism (addiction).....	19	17	..	1	..	..	..	..	..	..	1	..	..	..
Drug addiction.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	26	22	..	1	..	..	..	..	1	1	..	..	1	..
MENTAL DEFICIENCY.....	110	5	3	6	8	5	10	5	19	21	6	10	6	6
WITHOUT MENTAL DISORDER.....	11	11	..	..	..	..	..	..	..	..	..	..	..	..
GRAND TOTAL.....	1357	140	87	132	179	69	51	45	124	147	122	111	59	91

TABLE 9—PATIENTS ON BOOKS—FIRST ADMISSIONS AT END OF YEAR BY TIME ON BOOKS AND MENTAL DISORDER—WHITE FEMALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	TIME ON BOOKS												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:														
Drug or poison intoxication (except alcohol).....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
All other conditions.....	1	..	..	..	..	..	..	..	..	..	..	..	1	..
TOTAL ACUTE BRAIN SYNDROMES.....	2	1	..	..	..	..	..	..	..	..	..	..	1	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	22	..	..	..	..	..	..	1	4	9	8	..	..	..
Epidemic encephalitis.....	3	..	..	..	..	..	..	..	..	2	..	1	..	..
Other intracranial infections.....	1	..	..	..	..	..	1	..	..	..	..	..	..	..
Alcohol intoxication.....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	219	22	14	32	50	24	19	13	28	14	2	..	..	1
Other circulatory disturbance.....	14	1	..	2	4	..	3	..	1	2	1	2	1	..
Convulsive disorder.....	48	4	1	3	..	3	..	1	2	9	7	10	4	4
Senile brain disease.....	80	7	4	9	11	18	9	10	5	1	..	3	1	2
Other disturbance of metabolism, growth, and nutrition.....	10	..	..	..	1	1	..	..	2	2	2	1	1	..
Intracranial neoplasm.....	2	..	..	..	..	..	..	..	2	..	..	..	..	..
Diseases of unknown and uncertain cause.....	8	1	..	1	2	..	..	1	3	..	..	..	..	..
Chronic brain syndrome of unknown cause.....	6	..	1	..	2	..	1	..	2	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	414	35	20	48	70	46	30	26	47	39	20	18	7	8
PSYCHOTIC DISORDERS:														
Involuntional psychotic reaction.....	29	..	1	..	2	3	..	1	2	3	7	7	1	2
Manic-depressive reaction.....	37	2	2	4	4	1	..	..	..	3	5	10	4	2
Schizophrenic reactions.....	739	37	37	58	77	30	20	25	66	65	69	71	53	131
Paranoid reactions.....	32	..	..	3	..	..	..	1	5	6	5	8	2	2
Other.....	2	..	..	..	..	..	..	..	..	1	..	1	..	..
TOTAL PSYCHOTIC DISORDERS.....	839	39	40	65	83	34	20	27	73	78	86	97	60	137
PSYCHONEUROTIC REACTIONS.....	123	24	19	44	16	1	5	2	2	3	2	3	1	1

PERSONALITY DISORDERS:															
Personality trait disturbance.....	2	2	..	.	..	..	..	..	..	..	..	..	..	1	..
Antisocial reaction.....	1	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Drug addiction.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	4	3	..	..	..	..	..	..	..	..	..	..	..	1	..
MENTAL DEFICIENCY.....	70	3	2	3	5	3	1	..	8	13	7	3	8	14	
WITHOUT MENTAL DISORDER.....	2	2	..	..	..	..	..	..	..	..	..	..	..	..	..
GRAND TOTAL.....	1454	107	81	160	174	84	56	55	130	133	115	121	78	160	

TABLE 9—PATIENTS ON BOOKS—FIRST ADMISSIONS AT END OF YEAR BY TIME ON BOOKS AND MENTAL DISORDER—COLORED MALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	TIME ON BOOKS												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:														
Alcohol intoxication.....	11	5	..	..	..	..	..	..	4	1	1	..	..	..
All other conditions.....	4	..	..	1	1	..	..	..	1	1	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	15	5	..	1	1	..	..	..	5	2	1	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	131	3	4	8	18	10	3	8	31	28	11	7	..	..
Other CNS syphilis.....	2	..	..	..	..	..	..	..	..	..	1	..	..	1
Epidemic encephalitis.....	2	..	..	..	..	..	..	1	..	..	..	1	..	..
Alcohol intoxication.....	23	2	3	7	6	1	2	1	..	1	..	..	..	..
Birth trauma.....	8	1	..	..	..	..	2	4	1	..	..	..	..	..
Other trauma.....	7	..	1	2	1	..	..	..	1	1	..	1	..	..
Cerebral arteriosclerosis.....	200	16	18	32	51	25	15	8	21	11	3	..	..	1
Other circulatory disturbance.....	11	..	1	..	1	..	1	..	..	..	..	6	1	1
Convulsive disorder.....	73	..	1	4	5	7	3	2	12	17	13	6	..	3
Senile brain disease.....	9	1	..	..	..	..	1	2	1	4	..	..	..	..
Other disturbance of metabolism, growth, and nutrition.....	3	..	..	..	..	..	..	..	..	..	..	1	2	..
Diseases of unknown and uncertain cause.....	5	..	..	..	..	3	1	..	..	..	..	..	..	1
Chronic brain syndrome of unknown cause.....	5	..	..	..	..	..	..	1	4	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	479	23	28	53	82	46	28	27	71	61	29	22	3	6
PSYCHOTIC DISORDERS:														
Manic-depressive reaction.....	39	1	1	1	4	3	..	1	6	7	4	5	2	4
Schizophrenic reactions.....	737	27	19	50	71	58	34	55	92	105	80	43	34	69
Other.....	2	..	..	..	..	..	..	..	..	1	1	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	778	28	20	51	75	61	34	56	98	113	85	48	36	73
PSYCHONEUROTIC REACTIONS.....	1	..	..	1	..	..	..	..	..	..	..	..	..	..

[illegible]

TABLE 9—PATIENTS ON BOOKS—FIRST ADMISSIONS AT END OF YEAR BY TIME ON BOOKS AND MENTAL DISORDER—COLORED FEMALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	TIME ON BOOKS												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:														
All other conditions.....	1	..	..	..	..	..	..	..	..	..	1	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	1	..	..	..	..	..	..	..	..	..	1	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	25	..	1	1	2	1	..	2	9	4	3	2	..	..
Epidemic encephalitis.....	1	..	..	..	..	..	..	1	..	..	..	..	..	..
Alcohol intoxication.....	3	..	..	2	..	..	..	..	..	..	1	..	..	..
Birth trauma.....	1	..	1	..	..	..	..	..	..	..	..	..	..	..
Other trauma.....	3	1	2	..	..	..	..	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	140	6	6	20	23	14	11	13	23	18	2	2	1	1
Other circulatory disturbance.....	16	2	..	1	1	..	1	..	1	1	3	4	1	1
Convulsive disorder.....	57	2	5	4	4	1	2	2	9	11	6	6	4	1
Senile brain disease.....	77	16	9	8	6	9	9	4	7	6	2	..	..	1
Other disturbance of metabolism, growth, and nutrition.....	17	..	1	..	1	..	..	..	1	2	2	3	6	1
Diseases of unknown and uncertain cause.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
Chronic brain syndrome of unknown cause.....	3	..	..	..	..	..	..	1	..	1	1	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	344	28	25	36	37	25	23	23	50	43	20	17	12	5
PSYCHOTIC DISORDERS:														
Involuntal psychotic reaction.....	1	..	..	..	..	..	..	..	..	1	..	..	..	..
Manic-depressive reaction.....	148	8	10	9	9	12	4	5	11	21	27	16	10	6
Schizophrenic reaction.....	654	38	28	49	41	28	26	16	124	100	40	39	44	81
Paranoid reactions.....	12	..	..	..	..	..	..	..	1	4	3	4	..	..
TOTAL PSYCHOTIC DISORDERS.....	815	46	38	58	50	40	30	21	136	126	70	59	54	87
PSYCHONEUROTIC REACTIONS.....	3	..	1	2	..	..	..	..	..	..	..	..	..	..

PERSONALITY DISORDERS:

Drug addiction.....	1	..	..	..	..	..	..	..	..	..	1	..	..	..
TOTAL PERSONALITY DISORDERS.....	1	..	..	..	..	..	..	..	..	..	1	..	..	..
MENTAL DEFICIENCY.....	124	2	5	1	3	2	2	5	28	18	16	13	12	17
WITHOUT MENTAL DISORDER.....	2	1	..	..	..	..	..	..	1	..	..	..	..	..
GRAND TOTAL.....	1290	77	69	97	90	67	55	49	215	187	108	89	78	109

TABLE 9—PATIENTS ON BOOKS—READMISSIONS AT END OF YEAR BY TIME ON BOOKS AND MENTAL DISORDER—WHITE MALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	TIME ON BOOKS												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:														
All other conditions.....	2	..	..	..	..	..	1	1	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	2	..	..	..	..	..	1	1	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	20	1	..	1	..	2	1	2	4	9	..	..	..	..
Epidemic encephalitis.....	5	..	..	1	2	..	..	..	..	2	..	..	..	..
Alcohol intoxication.....	2	..	..	1	1	..	..	..	..	..	..	..	..	..
Other trauma.....	8	..	..	..	..	2	1	1	2	..	..	2	..	..
Cerebral arteriosclerosis.....	38	6	4	4	10	4	4	1	4	..	..	..	..	1
Other circulatory disturbance.....	6	1	..	1	2	..	..	..	1	..	..	..	..	..
Convulsive disorder.....	39	3	3	1	1	1	1	5	5	7	6	2	1	3
Senile brain disease.....	2	..	..	..	1	..	..	..	..	1	..	..	..	..
Intracranial neoplasm.....	1	..	..	..	..	..	..	..	..	1	..	..	..	..
Diseases of unknown and uncertain cause.....	2	..	1	..	..	..	..	1	..	..	..	..	..	..
Chronic brain syndrome of unknown cause.....	2	..	..	..	..	1	..	..	..	..	..	1	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	125	11	8	10	16	11	7	10	16	20	6	5	1	4
PSYCHOTIC DISORDERS:														
Involutional psychotic reaction.....	7	..	..	2	2	..	..	..	1	1	..	..	1	..
Manic-depressive reaction.....	76	1	5	8	13	7	4	2	8	12	10	4	2	..
Schizophrenic reactions.....	284	21	21	28	30	16	15	10	37	28	19	17	16	26
Paranoid reactions.....	1	..	..	..	..	..	..	..	..	..	..	1	..	..
TOTAL PSYCHOTIC DISORDERS.....	368	22	26	38	45	23	19	12	46	41	29	22	19	26
PSYCHONEUROTIC REACTIONS.....	16	2	..	9	..	2	..	2	1	..	..	..	..	..

TABLE 9—PATIENTS ON BOOKS—READMISSIONS AT END OF YEAR BY TIME ON BOOKS AND MENTAL DISORDER—WHITE FEMALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	TIME ON BOOKS												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	7	..	..	..	1	..	1	..	3	1	1	..	..	..
Epidemic encephalitis.....	2	..	..	1	..	..	..	..	..	1	..	..	..	..
Birth trauma.....	1	..	..	..	..	..	1	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	76	6	9	16	12	8	5	7	8	3	2	1	..	..
Other circulatory disturbance.....	10	1	..	1	2	1	1	..	2	1	1	1	..	..
Convulsive disorder.....	47	2	1	5	2	4	1	2	3	4	5	4	6	8
Senile brain disease.....	3	..	..	..	1	1	..	..	..	..	..	..	..	1
Other disturbance of metabolism, growth, and nutrition.....	1	..	..	..	..	..	..	1	..	..	..	..	..	..
Intracranial neoplasm.....	1	..	..	..	..	..	..	..	..	..	..	..	..	1
Diseases of unknown and uncertain cause.....	1	..	..	..	1	..	..	..	..	..	..	..	..	..
Chronic brain syndrome of unknown cause.....	1	..	..	..	..	..	..	..	..	..	..	1	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	150	9	10	23	19	14	9	10	16	9	9	6	6	10
PSYCHOTIC DISORDERS:														
Involutional psychotic reaction.....	5	..	..	..	1	..	..	..	1	3	..	..	..	3
Manic-depressive reaction.....	63	5	3	6	4	5	1	3	5	10	6	9	3	3
Schizophrenic reactions.....	425	23	24	42	55	27	23	27	55	33	29	29	19	39
Paranoid reactions.....	19	..	..	..	2	4	1	..	2	4	3	1	2	..
TOTAL PSYCHOTIC DISORDERS.....	512	28	27	48	62	36	25	30	63	50	38	39	24	42
PSYCHONEUROTIC REACTIONS.....														
	55	7	3	19	9	5	1	2	1	3	2	1	2	..
PERSONALITY DISORDERS:														
Personality pattern disturbance.....	2	1	..	..	1	..	..	..	..	..	..	..	..	..
Antisocial reaction.....	4	..	..	..	1	..	..	..	..	..	..	..	2	1
TOTAL PERSONALITY DISORDERS.....	6	1	..	..	2	..	..	..	..	..	..	..	2	1

MENTAL DEFICIENCY.....	29	..	1	..	2	1	1	..	4	11	2	2	2	3
WITHOUT MENTAL DISORDER.....	2	1	..	1	..	..	..	..	..	..	..	..	..	..
GRAND TOTAL.....	754	46	41	91	94	56	36	42	84	73	51	48	36	56

TABLE 9—PATIENTS ON BOOKS—READMISSIONS AT END OF YEAR BY TIME ON BOOKS AND MENTAL DISORDER—COLORED MALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	TIME ON BOOKS												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:														
Alcohol intoxication.....	2	1	..	..	1	..	..	..	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	2	1	..	..	1	..	..	..	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	2	..	..	..	1	..	..	..	1	..	..	..	..	..
Alcohol intoxication.....	2	..	..	3	1	..	2	..	..	..	..	..	..	..
Birth trauma.....	2	..	..	..	1	..	1	..	..	..	..	..	..	..
Other trauma.....	1	..	..	..	..	..	..	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	27	4	3	4	5	2	2	1	3	3	..	..	..	..
Other circulatory disturbance.....	1	..	..	..	1	..	..	..	..	..	..	..	..	..
Convulsive disorder.....	23	2	1	..	3	3	2	..	5	4	..	2	..	..
Other disturbance of metabolism, growth, and nutrition.....	1	..	..	..	..	..	..	..	..	1	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	64	8	4	7	12	5	7	1	10	7	1	2	..	..
PSYCHOTIC DISORDERS:														
Manic-depressive reaction.....	31	1	1	5	1	2	1	1	2	4	2	6	3	2
Schizophrenic reactions.....	166	14	6	14	17	12	18	12	26	14	7	10	4	12
Paranoid reactions.....	2	..	..	..	..	..	..	..	..	..	1	..	1	..
TOTAL PSYCHOTIC DISORDERS.....	199	15	7	19	18	14	19	13	28	18	10	16	8	14
PERSONALITY DISORDERS:														
Alcoholism (addiction).....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
MENTAL DEFICIENCY.....	25	1	..	1	2	1	1	..	6	5	2	1	1	4
WITHOUT MENTAL DISORDER.....	1	1	..	..	..	..	..	..	..	..	..	..	..	..
GRAND TOTAL.....	292	27	11	27	33	20	27	14	44	30	13	19	9	18

TABLE 9—PATIENTS ON BOOKS—READMISSIONS AT END OF YEAR BY TIME ON BOOKS AND MENTAL DISORDER—COLORED FEMALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	TIME ON BOOKS												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 years and Over
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	5	..	..	1	1	..	..	1	1	1	..	..	..	..
Birth trauma.....	23	2	2	2	4	5	1	2	2	..	..	..	1	..
Cerebral arteriosclerosis.....	3	..	..	1	1	..	1	1	..	..	..	..	..	..
Other circulatory disturbance.....	18	2	2	1	..	1	1	..	4	3	5	..	..	..
Convulsive disorder.....	7	..	..	1	2	1	..	1	2	..	..	..	..	..
Senile brain disease.....	1	..	..	..	..	..	..	..	1	..	..	..	..	..
Other disturbance of metabolism, growth, and nutrition.....	1	..	..	..	1	..	..	..	..	..	..	..	..	..
Diseases of unknown and uncertain cause.....	1	..	..	..	..	..	..	..	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	59	5	4	6	10	6	2	4	10	5	6	..	1	..
PSYCHOTIC DISORDERS:														
Manic-depressive reaction.....	92	9	10	8	9	3	5	5	14	13	4	7	2	3
Schizophrenic reactions.....	195	9	6	9	26	9	4	7	33	27	8	10	16	31
Paranoid reactions.....	3	..	..	..	..	..	..	..	1	..	..	..	2	..
TOTAL PSYCHOTIC DISORDERS.....	290	18	16	17	35	12	9	12	48	40	12	17	20	34
PSYCHONEUROTIC REACTIONS.....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
MENTAL DEFICIENCY.....	28	1	3	2	3	2	1	3	1	3	2	1	2	4
WITHOUT MENTAL DISORDER.....	1	..	..	..	..	..	..	..	..	..	..	..	1	..
GRAND TOTAL.....	379	24	23	26	48	20	12	19	59	48	20	18	24	38

TABLE 10—FIRST ADMISSION PATIENTS ON* TRIAL VISIT AT END OF YEAR BY AGE AT END OF YEAR AND MENTAL DISORDER—WHITE MALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	AGE (In Years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
Drug or poison intoxication (except alcohol).....	1	..	..	..	..	1	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	1	..	..	..	..	1	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic syphilis.....	1	..	..	1	..	..	..	..	..	..	..
Epidemic encephalitis.....	2	..	1	1	..	..	..	..	..	..	..
Alcohol intoxication.....	1	..	..	..	..	..	1	..	..	..	..
Other trauma.....	1	..	..	1	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	61	..	..	1	..	6	13	20	20	1	..
Other circulatory disturbance.....	2	..	..	..	..	1	1	..	..	..	..
Convulsive disorder.....	4	..	..	1	2	..	1	..	..	..	..
Senile brain disease.....	2	..	..	..	..	..	..	2	..	..	..
Diseases of unknown and uncertain cause.....	1	..	..	..	..	..	1	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	75	..	1	5	2	7	17	22	20	1	..
PSYCHOTIC DISORDERS:											
Involuntal psychotic reaction.....	6	..	..	1	..	2	3	..	..	..	..
Manic-depressive reaction.....	15	..	1	..	3	4	7	..	..	..	..
Schizophrenic reactions.....	105	..	16	27	29	25	8	..	..	..	..
Paranoid reactions.....	1	..	..	..	..	..	1	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	127	..	17	28	32	31	19	..	..	..	..
PSYCHOPHYSIOLOGIC AUTONOMIC AND VISCERAL DISORDERS	2	..	1	..	1	..	..	..	..	..	..
PSYCHONEUROTIC REACTIONS.....	30	..	1	8	5	13	3	..	..	..	..
MENTAL DEFICIENCY.....	8	..	4	3	..	1	..	..	..	..	..
GRAND TOTAL.....	243	..	24	44	40	53	39	22	20	1	..

*Includes those on trial visit or otherwise absent for 7 days or longer as of June 30, 1957.

TABLE 10—FIRST ADMISSION PATIENTS ON* TRIAL VISIT AT END OF YEAR BY AGE AT END OF YEAR AND MENTAL DISORDER—WHITE FEMALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	AGE (In Years)								
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over Age Un- known
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:										
Meningoencephalitic syphilis.....	1	..	..	..	..	1	..	..	..	..
Alcohol intoxication.....	1	..	..	..	1	..	..	..	..	..
Cerebral arteriosclerosis.....	48	..	..	..	..	3	17	21	6	1
Other circulatory disturbance.....	5	..	..	..	..	..	4	1	..	..
Convulsive disorder.....	3	..	1	..	1	1	..	..	..	..
Senile brain disease.....	3	..	..	..	..	..	..	2	..	1
TOTAL CHRONIC BRAIN SYNDROMES.....	61	..	1	..	2	5	21	24	6	1
PSYCHOTIC DISORDERS:										
Involutional psychotic reaction.....	3	..	..	..	..	2	..	1	..	..
Manic-depressive reaction.....	12	..	..	1	3	6	1	1	..	..
Schizophrenic reactions.....	141	..	14	43	44	32	8	..	..	..
Paranoid reactions.....	2	..	..	..	..	2	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	158	..	14	44	47	42	9	2	..	..
PSYCHONEUROTIC REACTIONS.....	85	..	6	16	28	20	14	1	..	..
MENTAL DEFICIENCY.....	5	..	..	..	2	2	1	..	..	..
GRAND TOTAL.....	309	..	21	60	79	69	45	27	6	1

*Includes those on trial visit or otherwise absent for 7 days or longer as of June 30, 1957

TABLE 10—FIRST ADMISSION PATIENTS ON* TRIAL VISIT AT END OF YEAR BY AGE AT END OF YEAR AND MENTAL DISORDER—COLORED MALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	AGE (In Years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over	Age Un- known
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:											
All other conditions.....	1	..	..	..	..	1	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	1	..	..	..	..	1	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic syphilis.....	12	..	1	..	4	6	1	..	..	..	..
Alcohol intoxication.....	11	..	..	1	6	4	..	..	..	..	..
Cerebral arteriosclerosis.....	30	..	..	..	1	10	8	5	5	1	..
Other circulatory disturbance.....	1	..	..	1	..	..	..	..	..	..	..
Convulsive disorder.....	4	..	2	1	1	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	58	..	3	3	12	20	9	5	5	1	..
PSYCHOTIC DISORDERS:											
Manic-depressive reaction.....	8	..	1	3	1	3	..	..	..	..	..
Schizophrenic reactions.....	59	1	18	24	11	4	1	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	67	1	19	27	12	7	1	..	..	..	..
MENTAL DEFICIENCY.....	4	..	2	1	1	..	..	..	..	..	..
GRAND TOTAL.....	130	1	24	31	25	28	10	5	5	1	..

*Includes those on trial visit or otherwise absent for 7 days or longer as of June 30, 1957

TABLE 10—FIRST ADMISSION PATIENTS ON* TRIAL VISIT AT END OF YEAR BY AGE AT END OF YEAR AND MENTAL DISORDER—COLORED FEMALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	AGE (In Years)									
	Total	Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over Age Un- known
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:										
Meningoencephalitic syphilis.....	3	..	..	1	1	1	..	..	..	..
Alcohol intoxication.....	1	..	..	..	1	..	..	..	..	..
Cerebral arteriosclerosis.....	25	..	..	..	1	7	7	8	2	..
Other circulatory disturbance.....	3	..	..	..	..	1	..	..	..	..
Convulsive disorder.....	11	..	2	4	2	3	..	..	..	..
Senile brain disease.....	4	..	..	..	..	..	..	1	3	..
Other disturbance of metabolism, growth, and nutrition	1	..	..	..	1	..	..	..	..	..
Intracranial neoplasm.....	2	..	..	1	1	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	49	..	2	6	7	12	7	9	5	1
PSYCHOTIC DISORDERS:										
Manic-depressive reaction.....	29	..	1	6	14	5	1	2	..	..
Schizophrenic reactions.....	77	..	12	33	20	11	1	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	106	..	13	39	34	16	2	2	..	..
PSYCHONEUROTIC REACTIONS.....	4	..	1	..	1	..	2	..	..	..
MENTAL DEFICIENCY.....	6	..	..	1	3	2	..	..	..	..
GRAND TOTAL.....	165	..	16	46	45	30	11	11	5	1

*Includes those on trial visit or otherwise absent for 7 days or longer as of June 30, 1957

TABLE 10—READMISSION PATIENTS ON* TRIAL VISIT AT END OF YEAR BY AGE AT END OF YEAR AND MENTAL DISORDER—WHITE MALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	AGE (In Years)								
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over Age Un- known
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:										
Other intracranial infections.....	1	..	1	..	..	..	..	..	..	..
Alcohol intoxication.....	1	..	..	..	..	..	1	..	..	..
Other trauma.....	2	..	..	1	..	1	..	..	..	..
Cerebral arteriosclerosis.....	2	..	..	..	..	..	3	3	..	..
Other circulatory disturbance.....	33	..	..	..	1	1	..	..	1	..
Convulsive disorder.....	5	..	..	1	1	2	1	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	20	..	1	2	2	4	5	3	3	..
PSYCHOTIC DISORDERS:										
Involuntal psychotic reaction.....	1	..	..	..	..	..	1	..	..	..
Manic-depressive reaction.....	25	..	..	1	2	6	8	6	1	1
Schizophrenic reactions.....	56	..	4	22	16	9	4	..	..	1
TOTAL PSYCHOTIC DISORDERS.....	82	..	4	23	18	15	13	6	1	2
PSYCHONEUROTIC REACTIONS.....	9	..	..	2	3	3	..	1	..	..
MENTAL DEFICIENCY.....	2	..	..	1	1	..	..	..	..	..
GRAND TOTAL.....	113	..	5	28	24	22	18	10	4	2

*Includes those on trial visit or otherwise absent for 7 days or longer as of June 30, 1957

TABLE 10—READMISSION PATIENTS ON* TRIAL VISIT AT END OF YEAR BY AGE AT END OF YEAR AND MENTAL DISORDER—WHITE FEMALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	AGE (In Years)									
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over Known	Age Un- Known
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:											
Meningoencephalitic syphilis.....	1	..	..	..	..	..	1	..	..	..	..
Cerebral arteriosclerosis.....	29	..	..	..	..	1	10	13	5	..	..
Other circulatory disturbance.....	2	..	..	..	..	1	1	..	..	..	..
Convulsive disorder.....	1	..	..	1	..	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	33	..	..	1	..	2	12	13	5	..	..
PSYCHOTIC DISORDERS:											
Involuntal psychotic reaction	1	..	..	..	..	..	1	..	..	..	..
Manic-depressive reaction.....	15	..	..	..	2	8	4	1	..	..	..
Schizophrenic reactions.....	128	..	5	29	42	37	10	4	..	..	1
Paranoid reactions.....	2	..	..	..	1	1	..	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	146	..	5	29	45	46	15	5	..	..	1
PSYCHONEUROTIC REACTIONS.....	27	..	..	3	9	12	3	..	..	..	..
MENTAL DEFICIENCY.....	1	..	..	..	..	..	1	..	..	..	..
WITHOUT MENTAL DISORDER.....	1	..	..	..	1	..	..	..	..	..	..
GRAND TOTAL.....	208	..	5	33	55	60	31	18	5	..	1

*Includes those on trial visit or otherwise absent for 7 days or longer as of June 30, 1957

TABLE 10—READMISSION PATIENTS ON* TRIAL VISIT AT END OF YEAR BY AGE AT END OF YEAR AND MENTAL DISORDER—COLORED MALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	AGE (In Years)								
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over Age Un- known
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:										
Meningoencephalitic syphilis.....	1	..	..	..	..	1	..	1	..	..
Alcohol intoxication.....	2	..	..	2	1	..	..	..	..	..
Cerebral arteriosclerosis.....	1	..	..	..	..	4	3	1	..	..
Convulsive disorder.....	1	..	..	..	1	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	16	..	..	2	2	5	5	2	..	..
PSYCHOTIC DISORDERS:										
Manic-depressive reaction.....	4	..	..	..	1	1	2	..	..	..
Schizophrenic reactions.....	20	..	4	8	5	3	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	24	..	4	8	6	4	2	..	..	..
MENTAL DEFICIENCY.....	2	..	1	..	..	1	..	..	..	..
GRAND TOTAL.....	42	..	5	10	8	10	7	2	..	..

*Includes those on trial visit or otherwise absent for 7 days or longer as of June 30, 1957

TABLE 10—READMISSION PATIENTS ON* TRIAL VISIT AT END OF YEAR BY AGE AT END OF YEAR AND MENTAL DISORDER—COLORED FEMALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	AGE (In Years)								
		Under 15	15-24	25-34	35-44	45-54	55-64	65-74	75-84	85 & Over Age Un- known
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:										
Alcohol intoxication.....	1	..	..	..	1	..	..	..	..	..
Birth trauma.....	1	..	..	..	1	..	..	..	..	..
Cerebral arteriosclerosis.....	1	..	..	..	..	2	2	2	1	..
Other circulatory disturbance.....	1	..	..	..	..	..	1	..	..	..
Convulsive disorder.....	1	..	..	..	1	..	..	..	..	..
Intracranial neoplasm.....	2	..	..	1	..	1	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	13	..	..	1	3	3	3	2	1	..
PSYCHOTIC DISORDERS:										
Manic-depressive reaction.....	22	..	..	5	7	8	1	1	..	..
Schizophrenic reactions.....	33	..	1	20	7	5	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	55	..	1	25	14	13	1	1	..	..
MENTAL DEFICIENCY.....	1	..	..	..	1	..	..	..	..	..
GRAND TOTAL.....	69	..	1	26	18	16	4	3	1	..

*Includes those on trial visit or otherwise absent for 7 days or longer as of June 30, 1957

TABLE 11—FIRST ADMISSION PATIENTS ON* TRIAL VISIT AT END OF YEAR BY TIME ON BOOKS AND MENTAL DISORDER—WHITE MALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	TIME ON BOOKS											
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years 30 and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:													
Drug or poison intoxication (except alcohol).....	1	..	1	..	..	..	..	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	1	..	1	..	..	..	..	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:													
Meningoencephalitic syphilis.....	1	..	..	..	1	..	..	..	..	..	..	..	..
Epidemic encephalitis.....	2	..	1	..	..	..	1	..	..	..	..	..	..
Alcohol intoxication.....	1	..	..	..	1	..	..	..	..	..	..	..	..
Other trauma.....	1	..	..	..	1	..	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	61	4	12	18	18	6	1	..	2	..	..	..	..
Other circulatory disturbance.....	2	..	..	1	1	..	..	..	..	..	..	..	..
Convulsive disorder.....	4	1	..	..	1	..	..	..	1	1	..	..	..
Senile brain disease.....	2	1	..	..	1	..	..	..	..	..	..	..	..
Diseases of unknown and uncertain cause.....	1	..	..	..	1	..	..	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	75	6	13	18	25	7	2	..	3	1	..	..	..
PSYCHOTIC DISORDERS:													
Involutional psychotic reaction.....	6	..	..	3	3	..	..	..	..	..	..	..	..
Manic-depressive reaction.....	15	..	4	7	2	2	..	..	..	..	..	..	..
Schizophrenic reactions.....	105	8	16	43	30	4	..	2	..	..	..	1	..
Paranoid reactions.....	1	..	1	..	..	..	..	..	..	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	127	8	21	53	35	6	..	2	..	..	..	1	..
PSYCHOPHYSIOLOGIC AUTONOMIC AND VISCERAL DISORDERS.....	2	..	..	2	..	..	..	..	..	..	..	..	..
PSYCHONEUROTIC REACTIONS.....	30	3	8	12	6	..	..	1	..	..	..	..	..
MENTAL DEFICIENCY.....	8	1	..	2	2	3	..	..	..	..	..	..	..
GRAND TOTAL.....	243	18	43	87	68	16	2	3	3	1	..	1	..

*Includes those on trial or otherwise absent for 7 days or longer as of June 30, 1957.

TABLE 11—FIRST ADMISSION PATIENTS ON* TRIAL VISIT AT END OF YEAR BY TIME ON BOOKS AND MENTAL DISORDER—WHITE FEMALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	TIME ON BOOKS												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 and Over
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	1	..	..	..	..	..	..	..	..	..	1	..	..	..
Alcohol intoxication.....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	48	3	7	21	12	4	..	..	..	1	..	..	..	..
Other circulatory disturbance.....	5	..	..	2	3	..	..	..	..	..	..	..	..	..
Convulsive disorder.....	3	..	..	2	..	..	..	..	..	..	1	..	..	..
Senile brain disease.....	3	..	..	3	..	..	..	..	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	61	3	7	29	15	4	..	..	..	1	2	..	..	..
PSYCHOTIC DISORDERS:														
Involutional psychotic reaction.....	3	..	..	..	1	1	..	..	..	..	..	1	..	..
Manic-depressive reaction.....	13	1	2	4	4	1	..	..	..	..	..	..	..	..
Schizophrenic reactions.....	141	4	27	42	42	9	6	2	4	3	..	2	..	..
Paranoid reactions.....	2	..	..	2	..	..	..	..	..	..	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	158	5	29	48	47	11	6	2	4	3	..	3	..	..
PSYCHONEUROTIC REACTIONS.....	85	15	16	42	8	2	1	..	..	..	1	..	..	..
MENTAL DEFICIENCY.....	5	1	2	..	1	..	..	..	..	1	..	..	..	..
GRAND TOTAL.....	309	24	54	119	71	17	7	2	4	5	3	3	..	..

*Includes those on trial or otherwise absent for 7 days or longer as of June 30, 1957.

TABLE 11—FIRST ADMISSION PATIENTS ON* TRIAL VISIT AT END OF YEAR BY TIME ON BOOKS AND MENTAL DISORDER—COLORED MALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	TIME ON BOOKS											
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years 30 and Over
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:													
All other conditions.....	1	..	..	..	1	..	..	..	..	..	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	1	..	..	..	1	..	..	..	..	..	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:													
Meningoencephalitic syphilis.....	12	..	1	2	6	12	..	1	..	..	..	..	..
Alcohol intoxication.....	11	..	2	8	1	..	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	30	..	2	11	14	12	1	..	..	..	..	..	..
Other circulatory disturbance.....	1	..	..	..	1	..	..	..	..	..	..	..	..
Convulsive disorder.....	4	..	..	1	1	2	..	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	58	..	5	22	23	6	1	1	..	..	..	..	..
PSYCHOTIC DISORDERS:													
Manic-depressive reaction.....	8	..	1	..	4	3	..	..	..	..	..	..	..
Schizophrenic reactions.....	59	1	4	22	14	8	3	1	4	1	1	..	..
TOTAL PSYCHOTIC DISORDERS.....	67	1	5	22	18	11	3	1	4	1	1	..	..
MENTAL DEFICIENCY.....	4	..	1	1	..	..	..	..	2	..	..	..	..
GRAND TOTAL.....	130	1	11	45	42	17	4	2	6	1	1	..	..

*Includes those on trial or otherwise absent for 7 days or longer as of June 30, 1957.

TABLE 11—FIRST ADMISSION PATIENTS ON* TRIAL VISIT AT END OF YEAR BY TIME ON BOOKS AND MENTAL DISORDER—COLORED FEMALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	TIME ON BOOKS												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 and Over
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	3	..	..	1	2	..	..	..	..	..	..	..	..	..
Alcohol intoxication.....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	25	..	3	8	9	1	..	4	..	..	..	..	..	..
Other circulatory disturbance.....	2	..	..	1	..	..	..	..	..	..	1	..	..	..
Convulsive disorder.....	11	..	2	4	3	1	..	..	1	..	..	..	..	..
Senile brain disease.....	4	1	1	..	..	2	..	..	..	..	..	..	..	..
Other disturbance of metabolism, growth, and nutrition.....	1	..	..	..	1	..	..	..	..	..	..	..	..	..
Intracranial neoplasm.....	2	..	..	..	..	..	..	..	2	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	49	1	6	15	15	4	..	4	3	..	1	..	..	..
PSYCHOTIC DISORDERS:														
Manic-depressive reaction.....	29	2	7	6	5	3	1	1	1	2	1	..	..	..
Schizophrenic reactions.....	77	..	11	28	18	7	..	..	10	..	1	2	..	..
TOTAL PSYCHOTIC DISORDERS.....	106	2	18	34	23	10	1	1	11	2	2	2	..	..
PSYCHONEUROTIC REACTIONS.....	4	..	1	3	..	..	..	..	..	..	..	..	..	..
MENTAL DEFICIENCY.....	6	..	2	2	..	..	..	..	2	..	..	..	..	..
GRAND TOTAL.....	165	3	27	54	38	14	1	5	16	2	3	2	..	..

*Includes those on trial or otherwise absent for 7 days or longer as of June 30, 1957.

TABLE 11—READMISSION PATIENTS ON* TRIAL VISIT AT END OF YEAR BY TIME ON BOOKS AND MENTAL DISORDER—WHITE MALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	TIME ON BOOKS												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 and Over
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Other intracranial infections.....	1	..	..	..	..	..	..	1	..	..	..	..	..	..
Alcohol intoxication.....	1	..	..	..	1	..	..	..	..	..	..	..	..	..
Other trauma.....	2	..	..	..	..	1	..	1	..	..	..	..	..	..
Cerebral arteriosclerosis.....	3	..	2	2	3	..	1	..	..	..	..	..	..	..
Other circulatory disturbance.....	3	..	..	..	1	1	..	1	..	..	..	..	..	..
Convulsive disorder.....	5	..	3	..	1	..	..	..	1	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	20	..	5	2	6	2	1	3	1	..	..	..	..	..
PSYCHOTIC DISORDERS:														
Involuntional psychotic reaction.....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
Manic-depressive reaction.....	25	..	2	7	8	1	3	1	..	2	1	..	..	..
Schizophrenic reactions.....	56	2	9	21	13	3	..	1	4	2	..	1	..	..
TOTAL PSYCHOTIC DISORDERS.....	82	2	11	29	21	4	3	2	4	4	1	1	..	..
PSYCHONEUROTIC REACTIONS.....	9	1	..	8	..	..	..	..	..	..	..	..	..	..
MENTAL DEFICIENCY.....	2	..	..	..	..	1	..	..	1	..	..	..	..	..
GRAND TOTAL.....	113	3	16	39	27	7	4	5	6	4	1	1	..	..

*Includes those on trial or otherwise absent for 7 days or longer as of June 30, 1957.

TABLE 11—READMISSION PATIENTS ON* TRIAL VISIT AT END OF YEAR BY TIME ON BOOKS AND MENTAL DISORDER—WHITE FEMALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	TIME ON BOOKS												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 and Over
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	1	..	..	..	1	..	..	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	29	..	6	7	7	3	1	2	1	..	..	..	..	..
Other circulatory disturbance.....	2	..	..	1	1	..	..	..	..	..	..	..	..	..
Convulsive disorder.....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	33	2	6	9	9	3	1	2	1	..	..	..	..	..
PSYCHOTIC DISORDERS:														
Involutional psychotic reaction.....	1	..	..	..	..	..	..	..	..	..	1	..	..	..
Manic-depressive reaction.....	15	1	2	4	4	1	..	2	..	..	..	..	..	..
Schizophrenic reactions.....	128	7	13	29	40	13	9	4	6	7	..	..	..	..
Paranoid reactions.....	2	..	..	..	1	1	..	..	..	..	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	146	8	15	33	45	15	9	6	6	8	1	..	..	..
PSYCHONEUROTIC REACTIONS.....	27	3	1	13	6	3	..	1	..	..	..	..	..	..
MENTAL DEFICIENCY.....	1	..	1	..	..	..	..	..	..	..	..	..	..	..
WITHOUT MENTAL DISORDER.....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
GRAND TOTAL.....	208	13	23	56	60	21	10	9	7	8	1	..	..	..

*Includes those on trial or otherwise absent for 7 days or longer as of June 30, 1957.

TABLE 11—READMISSION PATIENTS ON* TRIAL VISIT AT END OF YEAR BY TIME ON BOOKS AND MENTAL DISORDER—COLORED MALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	TIME ON BOOKS												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 and Over
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Meningoencephalitic syphilis.....	2	..	..	1	1	..	..	..	..	..	..	..	..	..
Alcohol intoxication.....	5	..	..	2	2	..	1	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	8	1	..	4	1	1	..	..	1	..	..	..	..	..
Convulsive disorder.....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	16	1	..	8	4	1	1	..	1	..	..	..	..	..
PSYCHOTIC DISORDERS:														
Manic-depressive reaction.....	4	..	..	2	1	1	..	..	..	..	..	..	..	..
Schizophrenic reactions.....	20	..	5	4	7	3	1	..	..	..	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	24	..	5	6	8	4	1	..	..	..	..	..	..	..
MENTAL DEFICIENCY.....	2	..	..	..	2	..	..	..	..	..	..	..	..	..
GRAND TOTAL.....	42	1	5	14	14	5	2	..	1	..	..	..	..	..

*Includes those on trial or otherwise absent for 7 days or longer as of June 30, 1957.

TABLE 11—READMISSION PATIENTS ON* TRIAL VISIT AT END OF YEAR BY TIME ON BOOKS AND MENTAL DISORDER—COLORED FEMALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total	TIME ON BOOKS												
		Under 3 mos.	3-5 mos.	6-11 mos.	1 year	2 years	3 years	4 years	5-9 years	10-14 years	15-19 years	20-24 years	25-29 years	30 and Over
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:														
Alcohol intoxication.....	1	..	..	1	..	..	..	..	..	..	..	..	..	..
Birth trauma.....	1	..	..	..	1	..	..	..	..	..	..	..	..	..
Cerebral arteriosclerosis.....	7	..	..	1	4	1	..	..	..	..	..	..	1	..
Other circulatory disturbance.....	1	..	..	..	1	..	..	..	..	..	..	..	..	..
Convulsive disorder.....	1	..	..	..	..	..	..	..	1	..	..	..	..	..
Intracranial neoplasm.....	2	..	1	..	..	..	..	..	1	..	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	13	..	1	2	6	1	..	..	2	..	..	..	1	..
PSYCHOTIC DISORDERS:														
Manic-depressive reaction.....	22	..	3	6	6	..	3	1	1	2	..	..	..	..
Schizophrenic reactions.....	33	..	1	6	15	3	1	2	3	12	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	55	..	4	12	21	3	4	3	4	4	..	..	..	..
MENTAL DEFICIENCY.....	1	..	..	..	1	..	..	..	..	..	..	..	..	..
GRAND TOTAL.....	69	..	5	14	28	4	4	3	4	6	..	..	1	..

*Includes those on trial or otherwise absent for 7 days or longer as of June 30, 1957.

TABLE 12—DISPOSITION OF FIRST ADMISSIONS WITHIN THE TWELVE MONTH PERIOD
FOLLOWING ADMISSION BY MENTAL DISORDER—WHITE MALE

Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total first admissions	Resident in Hospital	DISPOSITION			
			Discharges	On Trial Visit	Otherwise absent	Deaths
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:						
Alcohol intoxication.....	19	..	18	..	..	1
Drug or poison intoxication (except alcohol).....	6	..	6	..	..	..
All other conditions.....	1	..	..	..	..	1
TOTAL ACUTE BRAIN SYNDROMES.....	26	..	24	..	..	2
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:						
Meningoencephalitic syphilis.....	5	2	2	1	..	..
Other CNS syphilis.....	1	..	1	..	..	..
Other intracranial infections.....	1	1	..	..	..	..
Alcohol intoxication.....	3	1	1	1	..	..
Drug or poison intoxication (except alcohol).....	1	..	1	..	..	..
Birth trauma.....	1	1	..	..	..	..
Other trauma.....	4	..	3	1	..	..
Cerebral arteriosclerosis.....	174	39	56	16	..	63
Other circulatory disturbance.....	13	2	3	3	..	5
Convulsive disorder.....	6	3	2	1	..	..
Senile brain disease.....	8	2	2	1	..	3
Intracranial neoplasm.....	3	..	1	..	..	2
Diseases of unknown and uncertain cause.....	4	1	2	1	..	..
Chronic brain syndrome of unknown cause.....	2	1	1	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	226	53	75	25	..	73
PSYCHOTIC DISORDERS:						
Involuntary psychotic reaction.....	6	..	3	3	..	..
Manic-depressive reaction.....	18	3	12	3	..	1
Psychotic depressive reaction.....	5	2	3	..	..	..
Schizophrenic reactions.....	151	38	80	32	..	1
Paroid reactions.....	1	1	..	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	181	44	98	37	..	2
PSYCHONEUROTIC REACTIONS.....	22	1	15	6	..	..
PERSONALITY DISORDERS:						
Personality pattern disturbance.....	2	..	2	..	..	..
Personality trait disturbance.....	17	..	17	..	..	..
Antisocial reaction.....	12	..	12	..	..	..
Dyssocial reaction.....	1	..	1	..	..	..
Sexual deviation.....	3	..	3	..	..	..
Alcoholism (addiction).....	102	..	102	..	..	..
Drug addiction.....	2	..	2	..	..	..
TOTAL PERSONALITY DISORDERS.....	139	..	139	..	..	..
TRANSIENT SITUATIONAL PERSONALITY DISTURBANCE..	3	..	3	..	..	..
MENTAL DEFICIENCY.....	16	8	8	..	..	..
WITHOUT MENTAL DISORDER.....	54	..	54	..	..	..
GRAND TOTAL.....	667	106	416	68	..	77

TABLE 12—DISPOSITION OF FIRST ADMISSIONS WITHIN THE TWELVE MONTH PERIOD
FOLLOWING ADMISSION BY MENTAL DISORDER—WHITE FEMALE

Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total first admissions	Resident in Hospital	DISPOSITION			
			Discharges	On Trial Visit	Otherwise absent	Deaths
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:						
Alcohol intoxication.....	8	..	8	..	..	..
Drug or poison intoxication (except alcohol).....	6	..	6	..	..	..
All other conditions.....	1	..	1	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	15	..	15	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:						
Meningoencephalitic syphilis.....	1	..	1	..	..	..
Alcohol intoxication.....	1	..	..	..	..	1
Birth trauma.....	2	..	1	..	..	1
Other trauma.....	1	..	1	..	..	..
Cerebral arteriosclerosis.....	113	38	31	12	..	32
Other circulatory disturbance.....	14	1	7	2	..	4
Convulsive disorder.....	8	..	8	..	..	..
Senile brain disease.....	36	12	3	..	..	21
Other disturbance of metabolism, growth, and nutrition...	2	1	1	..	..	..
Diseases of unknown and uncertain cause.....	2	2	..	..	..	..
Chronic brain syndrome of unknown cause.....	2	2	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	182	56	53	14	..	59
PSYCHOTIC DISORDERS:						
Involuntional psychotic reaction.....	12	1	10	1	..	..
Manic-depressive reaction.....	8	..	4	4	..	..
Schizophrenic reactions.....	169	30	89	45	..	5
Paranoid reaction.....	3	1	2	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	192	32	105	50	..	5
PSYCHONEUROTIC REACTIONS.....	75	7	58	9	..	1
PERSONALITY DISORDERS:						
Personality pattern disturbance.....	5	..	5	..	..	..
Personality trait disturbance.....	14	..	14	..	..	..
Antisocial reaction.....	1	..	1	..	..	..
Alcoholism (addiction).....	8	..	8	..	..	..
Drug addiction.....	1	..	1	..	..	..
TOTAL PERSONALITY DISORDERS.....	29	..	29	..	..	..
TRANSIENT SITUATIONAL PERSONALITY DISTURBANCE..	2	..	2	..	..	..
MENTAL DEFICIENCY.....	18	4	12	1	..	1
WITHOUT MENTAL DISORDER.....	13	..	12	..	..	1
GRAND TOTAL.....	526	99	286	74	..	67

TABLE 12—DISPOSITION OF FIRST ADMISSIONS WITHIN THE TWELVE MONTH PERIOD
FOLLOWING ADMISSION BY MENTAL DISORDER—COLORED MALE

Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total first admissions	Resident in Hospital	DISPOSITION			
			Discharges	On Trial Visit	Otherwise absent	Deaths
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:						
Alcohol intoxication.....	26	..	26	..	..	..
Drug or poison intoxication (except alcohol).....	2	..	2	..	..	..
All other conditions.....	10	..	6	1	..	3
TOTAL ACUTE BRAIN SYNDROMES.....	38	..	34	1	..	3
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:						
Meningoencephalitic syphilis.....	21	12	..	6	..	3
Alcohol intoxication.....	25	2	19	4	..	..
Birth trauma.....	1	..	1	..	..	..
Other trauma.....	2	2	..	..	..	..
Cerebral arteriosclerosis.....	98	38	12	14	..	34
Other circulatory disturbance.....	2	..	..	1	..	1
Convulsive disorder.....	10	4	4	1	..	1
Senile brain disease.....	1	..	..	..	..	1
Diseases of unknown and uncertain cause.....	1	..	..	..	..	1
TOTAL CHRONIC BRAIN SYNDROMES.....	161	58	36	26	..	41
PSYCHOTIC DISORDERS:						
Manic-depressive reaction.....	7	..	3	3	..	1
Psychotic depressive reaction.....	2	..	1	1	..	..
Schizophrenic reactions.....	98	57	26	14	..	1
TOTAL PSYCHOTIC DISORDERS.....	107	57	30	18	..	2
PERSONALITY DISORDERS:						
Antisocial reaction.....	1	..	1	..	..	..
Alcoholism (addiction).....	4	..	4	..	..	..
TOTAL PERSONALITY DISORDERS.....	5	..	5	..	..	..
MENTAL DEFICIENCY.....	15	10	5	..	..	..
WITHOUT MENTAL DISORDER.....	28	1	26	..	..	1
GRAND TOTAL.....	354	126	136	45	..	47

TABLE 12—DISPOSITION OF FIRST ADMISSIONS WITHIN THE TWELVE MONTH PERIOD FOLLOWING ADMISSION BY MENTAL DISORDER—COLORED FEMALE

Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total first admissions	Resident in Hospital	DISPOSITION			
			Discharges	On Trial Visit	Otherwise absent	Deaths
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:						
Alcohol intoxication.....	7	..	7	..	..	..
Convulsive disorder.....	1	..	1	..	..	..
All other conditions.....	1	..	..	..	..	1
TOTAL ACUTE BRAIN SYNDROMES.....	9	..	8	..	..	1
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:						
Meningoencephalitic syphilis.....	1	..	1	..	..	..
Alcohol intoxication.....	1	..	1	..	..	..
Cerebral arteriosclerosis.....	44	14	13	9	..	8
Other circulatory disturbance.....	2	..	1	..	..	1
Convulsive disorder.....	11	1	7	3	..	..
Senile brain disease.....	28	6	4	..	..	18
Other disturbance of metabolism, growth, and nutrition....	2	..	1	1	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	89	21	28	13	..	27
PSYCHOTIC DISORDERS:						
Manic-depressive reaction.....	34	6	23	5	..	..
Schizophrenic reactions.....	72	24	29	17	..	2
TOTAL PSYCHOTIC DISORDERS.....	106	30	52	22	..	2
PSYCHONEUROTIC REACTIONS.....	5	..	5	..	..	..
PERSONALITY DISORDERS:						
Personality pattern disturbance.....	1	..	1	..	..	..
Personality trait disturbance.....	2	..	2	..	..	..
TOTAL PERSONALITY DISORDERS.....	3	..	3	..	..	..
MENTAL DEFICIENCY.....	8	1	5	2	..	..
WITHOUT MENTAL DISORDER.....	15	..	14	..	..	1
GRAND TOTAL.....	235	52	115	37	..	31

TABLE 12—DISPOSITION OF READMISSIONS WITHIN THE TWELVE MONTH PERIOD
FOLLOWING ADMISSION BY MENTAL DISORDER—WHITE MALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total Read- mission	DISPOSITION				
		Resident In Hospital	Discharge	On Trial Visit	Otherwise Absent	Deaths
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:						
Alcohol intoxication.....	2	..	2	..	..	..
Drug or poison intoxication (except alcohol).....	2	..	2	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	4	..	4	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:						
Diseases and conditions due to prenatal (constitutional) influence	1	..	1	..	..	..
Meningoencephalitic syphilis.....	1	1	..	..	..	..
Epidemic encephalitis.....	2	2	..	..	..	..
Alcohol intoxication.....	1	..	..	1	..	..
Cerebral arteriosclerosis.....	23	7	13	3	..	..
Other circulatory disturbance.....	2	1	1	..	..	..
Convulsive disorder.....	4	1	2	1	..	..
Senile brain disease.....	1	1	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	35	13	17	5	..	..
PSYCHOTIC DISORDERS:						
Involutional psychotic reaction.....	2	2	..	..	..	..
Manic-depressive reaction.....	22	4	13	4	..	1
Schizophrenic reactions.....	76	23	35	13	..	5
Paranoid reactions.....	1	..	1	..	..	..
TOTAL PSYCHOTIC DISORDERS.....	101	29	49	17	..	6
PSYCHONEUROTIC REACTIONS.....	6	..	5	..	..	1
PERSONALITY DISORDERS:						
Personality pattern disturbance.....	1	..	1	..	..	..
Personality trait disturbance.....	1	..	1	..	..	..
Antisocial reaction.....	4	..	3	..	..	1
Alcoholism (addiction).....	40	..	40	..	..	..
Drug addiction.....	2	..	2	..	..	..
TOTAL PERSONALITY DISORDERS.....	48	..	47	..	..	1
TRANSIENT SITUATIONAL PERSONALITY DISTURBANCE..	1	..	1	..	..	..
MENTAL DEFICIENCY.....	5	3	2	..	..	..
MENTAL DISORDER, UNDIAGNOSED.....	1	..	1	..	..	..
WITHOUT MENTAL DISORDER.....	12	..	10	..	..	2
GRAND TOTAL.....	213	45	136	22	..	10

TABLE 12—DISPOSITION OF READMISSIONS WITHIN THE TWELVE MONTH PERIOD
FOLLOWING ADMISSION BY MENTAL DISORDER—WHITE FEMALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total Read- mission	DISPOSITION				
		Resident In Hospital	Discharge	On Trial Visit	Otherwise Absent	Deaths
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:						
Alcohol intoxication.....	1	..	1	..	..	..
Drug or poison intoxication (except alcohol).....	2	..	3	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	4	..	4	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:						
Meningoencephalitic syphilis.....	1	..	..	1	..	..
Alcohol intoxication.....	1	..	1	..	..	..
Birth trauma.....	1	..	1	..	..	..
Cerebral arteriosclerosis.....	24	5	10	7	..	2
Other circulatory disturbance.....	3	1	1	1	..	..
Convulsive disorder.....	5	2	3	..	..	..
Senile brain disease.....	2	1	..	..	..	1
Diseases of unknown and uncertain cause.....	4	1	1	..	..	2
TOTAL CHRONIC BRAIN SYNDROMES.....	41	10	17	9	..	5
PSYCHOTIC DISORDERS:						
Involuntional psychotic reaction.....	1	..	..	1	..	..
Manic-depressive reaction.....	12	..	6	5	..	1
Schizophrenic reactions.....	90	13	34	43	..	..
TOTAL PSYCHOTIC DISORDERS.....	103	13	40	49	..	1
PSYCHONEUROTIC REACTION.....	26	3	17	6	..	..
PERSONALITY DISORDERS:						
Personality pattern disturbance.....	5	1	4	..	..	..
Personality trait disturbance.....	4	..	4	..	..	..
Antisocial reaction.....	2	..	2	..	..	..
Alcoholism (addiction).....	6	..	6	..	..	..
TOTAL PERSONALITY DISORDERS.....	17	1	16	..	..	..
MENTAL DEFICIENCY.....	5	2	3	..	..	..
WITHOUT MENTAL DISORDER.....	1	..	1	..	..	..
GRAND TOTAL.....	197	29	98	64	..	6

TABLE 12—DISPOSITION OF READMISSIONS WITHIN THE TWELVE MONTH PERIOD
FOLLOWING ADMISSION BY MENTAL DISORDER—COLORED MALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total Read- mission	DISPOSITION				
		Resident In Hospital	Discharge	On Trial Visit	Otherwise Absent	Deaths
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:						
Alcohol intoxication.....	3	1	2	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	3	1	2	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:						
Meningoencephalitic syphilis.....	1	..	..	1	..	..
Alcohol intoxication.....	5	..	3	2	..	..
Birth trauma.....	1	1	..	..	..	..
Cerebral arteriosclerosis.....	12	5	..	1	..	6
Other circulatory disturbance.....	1	1	..	..	..	..
Convulsive disorder.....	6	5	1	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	26	12	4	4	..	6
PSYCHOTIC DISORDERS:						
Manic-depressive reaction.....	6	4	..	1	..	1
Schizophrenic reactions.....	21	10	3	7	..	1
TOTAL PSYCHOTIC DISORDERS.....	27	14	3	8	..	2
PERSONALITY DISORDERS:						
Alcoholism (addiction).....	1	1	..	..	..	..
TOTAL PERSONALITY DISORDERS.....	1	1	..	..	..	..
MENTAL DEFICIENCY.....	2	..	..	2	..	..
WITHOUT MENTAL DISORDER.....	3	..	3	..	..	..
GRAND TOTAL.....	62	28	12	14	..	8

TABLE 12—DISPOSITION OF READMISSIONS WITHIN THE TWELVE MONTH PERIOD
FOLLOWING ADMISSION BY MENTAL DISORDER—COLORED FEMALE
Report for Year Ending June 30, 1957

MENTAL DISORDERS	Total Read- mission	DISPOSITION				
		Resident In Hospital	Discharge	On Trial Visit	Otherwise Absent	Deaths
ACUTE BRAIN SYNDROMES ASSOCIATED WITH:						
Alcohol intoxication.....	1	..	1	..	..	..
TOTAL ACUTE BRAIN SYNDROMES.....	1	..	1	..	..	..
CHRONIC BRAIN SYNDROMES ASSOCIATED WITH:						
Alcohol intoxication.....	1	1	..	..	..	..
Birth trauma.....	1	..	..	1	..	..
Cerebral arteriosclerosis.....	9	2	2	4	..	1
Other circulatory disturbance.....	1	..	..	1	..	..
Convulsive disorder.....	1	..	1	..	..	..
Senile brain disease.....	2	2	..	..	..	..
Diseases of unknown and uncertain cause.....	1	1	..	..	..	..
TOTAL CHRONIC BRAIN SYNDROMES.....	16	6	3	6	..	1
PSYCHOTIC DISORDERS:						
Involutional psychotic reaction.....	1	..	1	..	..	..
Manic-depressive reaction.....	27	3	18	6	..	..
Schizophrenic reactions.....	38	9	11	15	..	3
TOTAL PSYCHOTIC DISORDERS.....	66	12	30	21	..	3
MENTAL DEFICIENCY.....	5	2	2	1	..	..
WITHOUT MENTAL DISORDER.....	1	..	1	..	..	..
GRAND TOTAL.....	89	20	37	28	..	4